

Membership application form

Please complete this membership form in BLOCK CAPITALS, then return to membership@acevo.org.uk

* These fields must be completed.

YOUR DETAILS

* First name	* Organisation name
* Surname	* Billing address
* Job title	
* Email	Postcode
Additional email (optional)	Is this your <input type="checkbox"/> Organisation address <input type="checkbox"/> Home address
* Telephone	Which region do you live in?
Mobile	Website
Twitter handle (if applicable)	PA name (if applicable)
<input type="checkbox"/> Please tick to confirm we can promote it	PA email (if applicable)
	Registered charity number (if applicable)
* What is your main reason for joining ACEVO? (Please tick one box only)	
<input type="checkbox"/> Leadership development	<input type="checkbox"/> Advice and support
<input type="checkbox"/> Corporate Partner Services	<input type="checkbox"/> Other, please state:
<input type="checkbox"/> Information	<input type="checkbox"/> Networking
Where did you hear about ACEVO? (Please tick one box only)	
<input type="checkbox"/> Recommendation	<input type="checkbox"/> Sector Publication
<input type="checkbox"/> Search Engine	<input type="checkbox"/> Email from ACEVO
<input type="checkbox"/> Advert	<input type="checkbox"/> Social Media
<input type="checkbox"/> Other, please state:	

DETAILS OF YOUR ORGANISATION

* Gross annual income: £	* Approximate number of staff (Full-time equivalent)
	* Approximate number of volunteers (Full-time equivalent)
* Your organisation operates (Please tick one box only)	<input type="checkbox"/> Locally <input type="checkbox"/> Regionally <input type="checkbox"/> Nationally <input type="checkbox"/> Internationally
* Which of the following roles does your organisation undertake? (Tick all that apply)	* Type of organisation:
<input type="checkbox"/> Service Provider	<input type="checkbox"/> Charity <input type="checkbox"/> Social enterprise <input type="checkbox"/> Community interest company (CIC)
<input type="checkbox"/> Funder/Grantmaker	<input type="checkbox"/> Not for profit <input type="checkbox"/> Not applicable
<input type="checkbox"/> Membership Body/Association	What are your main funding sources? (Tick all that apply)
<input type="checkbox"/> Campaigner/Advocate	<input type="checkbox"/> Contracts with public bodies <input type="checkbox"/> Grants from public bodies
<input type="checkbox"/> Research Institute or 'Think tank'	<input type="checkbox"/> Commercial income (trading) <input type="checkbox"/> Grants from independent foundations
<input type="checkbox"/> Umbrella Organisation	<input type="checkbox"/> Public fundraising <input type="checkbox"/> Membership fees
<input type="checkbox"/> Advice and Support	<input type="checkbox"/> Income from investments <input type="checkbox"/> Other, please state:
Indicate your primary (1) and secondary (2) areas of activity. (Please mark a maximum of two)	
<input type="checkbox"/> Animals & Wildlife	<input type="checkbox"/> Education/Training
<input type="checkbox"/> Armed Forces	<input type="checkbox"/> Employment Support
<input type="checkbox"/> Art, Culture & Heritage	<input type="checkbox"/> Environment & Conservation
<input type="checkbox"/> BAME	<input type="checkbox"/> Equality & Diversity
<input type="checkbox"/> Children & Young People	<input type="checkbox"/> Faith-based
<input type="checkbox"/> Community Care & Hospices	<input type="checkbox"/> Family Welfare
<input type="checkbox"/> Community Development	<input type="checkbox"/> Funding
<input type="checkbox"/> Domestic Abuse	<input type="checkbox"/> Health & Social Care
<input type="checkbox"/> Other, please state:	<input type="checkbox"/> Homelessness & Housing
	<input type="checkbox"/> Human Rights
	<input type="checkbox"/> Learning Disability
	<input type="checkbox"/> LGBTQ+
	<input type="checkbox"/> Mental Health
	<input type="checkbox"/> Migrants, Refugees & Asylum Seekers
	<input type="checkbox"/> Older People
	<input type="checkbox"/> Overseas Development & Disaster Relief
	<input type="checkbox"/> Physical/Sensory Disability
	<input type="checkbox"/> Poverty
	<input type="checkbox"/> Prisoners & Offenders
	<input type="checkbox"/> Residential & Day Care
	<input type="checkbox"/> Sport & Recreation
	<input type="checkbox"/> Umbrella, Support & Volunteering
Data Protection	
The information you have provided will be used to administer your membership. Except where personal data is evidently confidential or personally sensitive, ACEVO may communicate with staff in your organisation to administer your membership, make a purchase or book to attend an event. We will only use your personal information for carefully considered and specific purposes which are aligned with our charitable objectives, to enable us to grow our reach and increase our impact with charity leaders. You can find details on how we process personal data at acevo.org.uk/privacy-policy	

EQUALITY AND DIVERSITY

ACEVO is committed to ensuring that its services are accessible to everyone regardless of gender, age, ethnicity, disability, sexual orientation or religion. The information you give on this form will help us comply with our policy of ensuring equality in our services to you.

As this information is personal completion of this section of the membership application form is optional.

You do not have to complete this section but it will help us improve our services if you can complete as much as possible. All information ACEVO collects will be treated confidentially in accordance with the General Data Protection Regulation (GDPR).

Gender <input type="checkbox"/> Woman <input type="checkbox"/> Man <input type="checkbox"/> Non-Binary <input type="checkbox"/> Prefer not to say If you prefer to use your own term, please state:
Age <input type="checkbox"/> 18–29 <input type="checkbox"/> 30–39 <input type="checkbox"/> 40–49 <input type="checkbox"/> 50–59 <input type="checkbox"/> 60–69 <input type="checkbox"/> 70+ <input type="checkbox"/> Prefer not to say
What is your ethnicity? Ethnic origin is not about nationality, place of birth or citizenship. It is about the group to which you perceive you belong. (Please tick the appropriate box) White <input type="checkbox"/> English <input type="checkbox"/> Welsh <input type="checkbox"/> Scottish <input type="checkbox"/> Northern Irish <input type="checkbox"/> Irish <input type="checkbox"/> British <input type="checkbox"/> Gypsy or Irish Traveller <input type="checkbox"/> Prefer not to say Any other white background, please state: Mixed/multiple ethnic groups <input type="checkbox"/> White and Black Caribbean <input type="checkbox"/> White and Black African <input type="checkbox"/> White and Asian <input type="checkbox"/> Prefer not to say Any other mixed background, please state: Asian/Asian British <input type="checkbox"/> Indian <input type="checkbox"/> Pakistani <input type="checkbox"/> Bangladeshi <input type="checkbox"/> Chinese <input type="checkbox"/> Prefer not to say Any other Asian background, please state: Black/African/Caribbean/Black British <input type="checkbox"/> African <input type="checkbox"/> Caribbean <input type="checkbox"/> Prefer not to say Any other Black/African/Caribbean background, please state: Other ethnic group <input type="checkbox"/> Arab <input type="checkbox"/> Latin American <input type="checkbox"/> Prefer not to say Any other ethnic group, please state:
Are you a disabled person? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Prefer not to say If you are a disabled person please tell us which of the following impairment groups apply to you. (You may tick more than one box) <input type="checkbox"/> Visual impairment <input type="checkbox"/> Physical impairment <input type="checkbox"/> Deaf/British Sign Language user <input type="checkbox"/> Hearing impairment <input type="checkbox"/> Mental health/mental distress issues <input type="checkbox"/> Learning difficulties <input type="checkbox"/> Neurodiverse <input type="checkbox"/> Long term health condition/hidden impairment <input type="checkbox"/> Any other disabled person, please state:
What is your sexual orientation? <input type="checkbox"/> Heterosexual <input type="checkbox"/> Gay woman/lesbian <input type="checkbox"/> Gay man <input type="checkbox"/> Bisexual <input type="checkbox"/> Prefer not to say If you prefer to use your own term, please state:
What is your religion or belief? <input type="checkbox"/> No religion or belief <input type="checkbox"/> Buddhist <input type="checkbox"/> Christian <input type="checkbox"/> Hindu <input type="checkbox"/> Jewish <input type="checkbox"/> Muslim <input type="checkbox"/> Sikh <input type="checkbox"/> Prefer not to say <input type="checkbox"/> Any other religion or belief, please state:

MEMBERSHIP FEES

Please select your membership fee from the price list below, based on the last reported annual income of your organisation.

Please note that a one time joining fee of £45 will be added to all new Full and Associate memberships.

ACEVO offers two types of membership. A **Full membership** for chief executives or the equivalent title within your organisation, and an **Associate membership** for aspiring CEOs, retired CEOs, or CEOs who are inbetween roles.

* This membership is paid for by: <input type="checkbox"/> Your organisation <input type="checkbox"/> Yourself	Promotional code	
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Full membership (based on organisation income)	1 year membership		3 year membership offer	
	Price	Direct debit price	Usual price	Discount price
< or = £100k	<input type="checkbox"/> £219	<input type="checkbox"/> £199	£657	<input type="checkbox"/> £558
> £100k to £500k	<input type="checkbox"/> £299	<input type="checkbox"/> £269	£897	<input type="checkbox"/> £762
> £500k to £1m	<input type="checkbox"/> £349	<input type="checkbox"/> £319	£1,047	<input type="checkbox"/> £890
> £1m to £5m	<input type="checkbox"/> £519	<input type="checkbox"/> £469	£1,557	<input type="checkbox"/> £1,323
> £5m to £10m	<input type="checkbox"/> £679	<input type="checkbox"/> £619	£2,037	<input type="checkbox"/> £1,731
> £10m to £20m	<input type="checkbox"/> £759	<input type="checkbox"/> £689	£2,277	<input type="checkbox"/> £1,935
> £20m	<input type="checkbox"/> £859	<input type="checkbox"/> £779	£2,577	<input type="checkbox"/> £2,190
Associate membership	1 year membership		3 year membership offer	
	Price	Direct debit price	Usual price	Discount price
Associate	<input type="checkbox"/> £219	<input type="checkbox"/> £199	£657	<input type="checkbox"/> £558
Associate CEO is a member of ACEVO	<input type="checkbox"/> £159	<input type="checkbox"/> £149	£477	<input type="checkbox"/> £405

PAYMENT

What is your preferred method of payment?

<input type="checkbox"/> DEBIT/CREDIT CARD	You will be sent a secure payment link
<input type="checkbox"/> DIRECT DEBIT	You will be sent a secure link to submit your bank information
<input type="checkbox"/> BANK TRANSFER/CHEQUE	You will be sent an invoice for payment

TERMS AND CONDITIONS

1. I apply to become a member of ACEVO in its form as a company limited by guarantee and agree to be bound by its articles of association which specify a maximum liability of £1 in the unlikely event of insolvency.
2. I understand ACEVO memberships are for the individual. Membership may be taken with you to your next role or transferred to your successor, depending on who paid for the membership.
3. I have read and agree to the code of conduct at acevo.org.uk/about/code-of-conduct
4. I have read and agree to all terms and conditions at acevo.org.uk/about/terms-and-conditions

Signature	Date
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