** MaccPride™ in association with TRANSCEND** 

**Application for membership for people under 18**

|  |  |
| --- | --- |
| Name:  | Date of Birth: |
| Email: | Telephone: |
| Address: | Preferred Pronouns:Interested in being a volunteer? YES/NO |

**Membership** as stated at Item 3 of the MaccPride™ Constitution:

Is open to anyone under 18 but they must have the consent from one Parent/Guardian/Carer to attend meetings and events (except where the events are specifically for those under 18, and where safeguarding and appropriate checks have been made).

Is for people who reside locally or in the surrounding areas of Macclesfield, or have local connection to this area as agreed by the Honorary Committee. Membership will begin as soon as the membership form has been completed and a nominal subscription of £1 has been paid.

Any offensive behaviour, including racist, sexist or inflammatory remarks, will not be permitted. Anyone behaving in an offensive way or breaking the equal opportunities policy may be asked not to attend further meetings or to resign from the group. The Honorary committee would be responsible for any decisions made in this respect.

**Declaration by Parent/Guardian/Carer**

1.MaccPride™ will use the details entered above to notify the young person under 18 of General or other meetings, and to keep in touch with them about events and opportunities. All information given will be stored within computer files in the strictest of confidence and in accordance with General Data Protection Regulations. It will be held securely and only accessed by authorised personnel.

2. I can request their data to be removed from the mailing list at any time, in writing or via email to MaccPride@hotmail.com. I am responsible for notifying MaccPride™ of any changes to my phone number below, or young person under 18 emails.

3. I give consent for the person under 18 above to have photographs taken and used with their permission online or other forms in respect of promotional material for MaccPride™.

By signing this form, you confirm that you have read, understood and agree to the above statements:

Signature of Parent/Guardian/Carer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone number in case of emergency:- ­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_