



APPLICATION FOR MEMBERSHIP

To: Stephanie Yorke-Edwards
20 Barlows Reach
Chelmer Village
Chelmsford
CM2 6SN

Fees: **ACTING - £40**

NON ACTING - £15

(50% discount for Students in full time education applies to Acting Membership only)

Title: Mr / Mrs / Miss / Ms (please circle)

Surname: _____ First Name: _____

Address: _____

Home Number: _____ Mobile: _____

E-mail Address: _____

Date of Birth: _____

If you are applying to be an ACTING member please answer the following questions:

Do you have any underlying medical condition or illness that would affect your cover under the CAODS insurance provided by NODA (see attached document)? YES / NO

Do you have a disability as stated under the Equality Act 2010 YES / NO

If you have answered YES to either of the above please provide details:

I am paying £40.00 by Cheque / Cash / Bank Transfer (please circle) as my subscription for ACTING membership of CAODS.

I am paying £15.00 by Cheque / Cash / Bank Transfer (please circle) as my subscription for NON-ACTING membership of CAODS.

I wish to Gift Aid all future annual subscriptions paid to CAODS and any paid in the last 4 years and declare that I am a UK taxpayer, resident in the UK for tax purposes.

Signed: _____

Date: _____

Cheques payable to "CAODS Membership Acc" / Transfers to Sort Code: 08-92-99 Acc No: 65724318

Please Note – The membership year runs from 1st June to 31st May.

Becoming a member of CAODS means that you are entitled to receive regular updates, communications and information which means that your contact details will need to be shared with CAODS personnel where necessary. We will not share your contact information with any one outside of CAODS unless you have given us your consent and any personal information will only be shared where necessary. Please tick to agree.