

# Membership Application Form

## Personal Details

Title	Mr / Miss / Mrs / Ms	Full Name
Home address		Postcode
Tel No.	Mobile No.	
Fax No.	E-mail address	

## Work Details

Job Title	Department
Name of Organisation	Address
	Postcode
Tel No.	Website

## Organisation Type

\*Please tick only one box

<input type="checkbox"/>	Voluntary	<input type="checkbox"/>	School	<input type="checkbox"/>	College
<input type="checkbox"/>	Education	<input type="checkbox"/>	Youth Service	<input type="checkbox"/>	Youth Justice
<input type="checkbox"/>	Police	<input type="checkbox"/>	YOT	<input type="checkbox"/>	Other (please specify)

Which address do you wish your mail to be sent to?

<input type="checkbox"/>	Home	<input type="checkbox"/>	Work
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No

Do you wish your home address to be circulated on the Keyfund mailing list / website?

## Your Employing Organisations Policies and Procedures

Please note that Keyfund holds no liability for members. Members who use Keyfund with groups of young people, operate within the procedures and code of practice of their employing organisation.

Please tick to confirm which of the following policies and procedures your employing organisation has:

Public Liability Insurance?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	Child Protection Policy?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Safeguarding Children & Vulnerable Adults Policy?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	Health & Safety Policy?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Equal Opportunities Policy?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	Risk Assessment Procedure?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No

Have you had an 'enhanced disclosure' Criminal Record Bureau clearance for working with young people within the last three years?

<input type="checkbox"/>	Yes	CRB Number
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\* Keyfund can only be used by Facilitators that have an 'enhanced disclosure' Criminal Records Bureau clearance for working with young people carried out within the last three years. If your clearance is still in progress or you have not sent your CRB application yet you may still attend the training course, however, you will not be certified to use Keyfund, nor will you be given access to Keyfund services until your clearance is returned. Fees for the Introduction to Keyfund Training and membership are non refundable.

<input type="checkbox"/>	In Progress	*
<input type="checkbox"/>	No	*

## Invoice Details

Please give specific details of who we should invoice for your training and membership fee.

Contact Person

Address

Name of Organisation

Tel No

Postcode

## Diversity Monitoring Information

Gender

Male

Female

Date of Birth

## Ethnic Origin

\*Please tick your ethnic origin.

### Asian or Asian British

Bangladeshi

Indian

Pakistani

Other please specify

### Black or Black British

African

Caribbean

Other please specify

### Chinese

Chinese

Other please specify

### Mixed

White & Asian

White & Black African

White & Black Caribbean

Other please specify

### White

English

Irish

Scottish

Welsh

Other please specify

### Other Ethnic Group

Other ethnic group please specify

## Special requirements

Do you have any special requirements when attending the Keyfund Training Day?

Yes

No

If so, how can we help?

## Supporting Statement

Keyfund promotes youth-led learning with groups of young people. Please tell us how Keyfund would fit into your practice (Please continue on a separate sheet if necessary).

### Keyfund Facilitator Training

I accept that the following charges will apply if I wish to cancel my place/fail to attend:

21 + days prior to the event = £10 administration fee

20 working days or less prior to the event = 100%

Non attendance on the day = 100%

In exceptional circumstances this fee may be waived at the discretion of the Training & Development Worker. In such circumstances, write to the Training & Development Worker giving full details of why you were unable to attend enclosing any supporting documentation, e.g. a doctor's note.

Cancellations must be received in writing or via email to [theteam@keyfund.org.uk](mailto:theteam@keyfund.org.uk) and must contain the full booking details including organisation name, booking and delegate contact details and invoice/receipt number. Verbal cancellations will not be accepted.

Keyfund reserves the right to cancel or postpone training courses.

### Declaration

I declare that the information I have entered on this form is true, accurate and complete:

Signature

Date

### Authorisation

Please ask your Line Manager (or equivalent) to sign below to say that they support your participation in Keyfund Training and becoming a Keyfund Member/Facilitator.

Name

Position

Signature

Date

### For Office Use Only:

Approved?

Yes

No

Approval Date:

Paid?

Yes

No

Invoice No:

Attended Training Day?

Yes

No

Training Date:

**Please return your completed form to:**  
**Kevin Franks, Regional Youth Work Unit, Design Works, William Street,**  
**Felling, Gateshead, NE10 0JP**  
**F: 0191 4404413**