

TOWER HAMLETS COMMUNITY TRANSPORT

Membership Application

Office use only

Received _____

Code _____

Invoice No _____

Paid _____

You are invited to apply for membership of THCT for 2018/2019. Please **COMPLETE** and return this form signed with a copy of your most recent accounts or budget for the forthcoming year. Your application cannot be considered without this information

Membership runs from 1st April 2018 to 31st March 2019. Organisations joining after 31st September be will charged 50% Membership fees on a scale based on the group's turnover as followed: --

<u>Organisation annual turnover</u>	<u>THCT Membership Fee</u>
Up to £1,000 to £20,000	£10
£20,001 to £50,000	£12
£50,001 to £100,000	£30
£100,001 to £200,000	£60
£200,001 to £500,000	£120
£500,001 to £1,000,000	£125
£1,000,001 and over	£250

Terms and Condition of Membership

Membership of THCT entitles your organisation to use THCT's vehicle service. THCT is a registered charity providing transport services under section 19 of the Transport Act. The Terms and condition of membership are set out in detail, please read carefully. They include some legal requirements regarding use of vehicles as well as THCT's procedures. If you do not have a copy of the Terms and conditions, please ask for one.

Do NOT send any money with this form.

We will invoice for the appropriate membership fee on the basis of the information you supply

PLEASE TYPE OR USE CAPITAL LETTERS!

Organisation _____

Office Address _____

Postcode _____

Company Registration Number (If applicable) _____

Registered Charity Number (If applicable) _____

Telephone 1 _____

Telephone 2 _____

Mobile _____

Fax _____

E-mail _____

Address for invoices & Or Correspondence _____
(if different from above)

Chairperson's Name (If Applicable)

Home Address _____

Secretary's Name _____

Treasurer's Name _____

How would you describe your organisation?

- Vol. Unfunded Vol. Funded Statutory

How is your organisation funded? (Please tick ALL that apply)

- LBTH
- Charitable Trust Health Authority Self-financed
- Other (Please describe) _____

Which Tower Hamlets groups do you cater for? (Please tick ALL that apply)

- Under 5's Elderly Women Families
- Ethnic Minority Unemployed Homeless Disabled
- Carers Youth
- Other (Please describe) _____

What are your organisation's concerns? (Please tick ALL that apply)

- Housing Environment Sport Advice & Information
- Drug Abuse Alcohol Abuse Health Community Care
- Mental Health Education Religion Arts
- Training Leisure
- Other (Please describe) _____

Contact Person

This is the person who will be our **MAIN CONTACT** with your organisation, who is authorised to make bookings on its behalf.

Name _____

Position in Organisation _____

Telephone _____(Day) _____(Evening)*

* You MUST give us an evening contact number – in case of emergency we must have an out-of hours contact. We will not disclose this to anyone else

Please give us the name(s) of up to three other persons authorised to make bookings on behalf of your organisation

Name _____ Position _____ Home Tel _____

Name _____ Position _____ Home Tel _____

Name _____ Position _____ Home Tel _____

**Please complete and sign the Declaration
(We will not accept unsigned applications)**

Declaration

Tower Hamlets Community Transport aims to relieve need, hardship, sickness and mental or Physical disability through the provision of transport facilities to voluntary organisations, statutory authorities and disadvantaged members of the community living or working in Tower Hamlets.

Our mission statement " *to combat social exclusion and increase independence through the provision of accessible, safe and affordable transport*"

In its work to achieve these aims, THCT is actively committed to opposing discrimination in all forms. No user, volunteer, employee or job applicant should receive less favourable treatment on the ground of gender, racial or ethnic origin, disability, religious belief, marital status, domestic responsibilities, or that they are gay. Management staff volunteers and users of THCT are required to uphold and comply with this policy.

**We have read the Terms and Conditions of membership
and agree to abide by them.**

Signed _____

Print Name _____

Position in Organisation _____

Date _____

- Have you answered **ALL** the questions?
- Have you enclosed your constitution?
- Have you enclosed your most recent accounts or budget?

PLEASE NOTE – We do **NOT** accept incomplete applications. If you have any Questions or require any more information please contact us before sending in your completed form. There will be a delay in accepting your membership if you have not completed all sections and enclosed the information we asked for.

Please return to:

**Tower Hamlets Community Transport
25-27 Newell Street
London
E14 7HP**

Registered Charity Number 289827