

Membership Registration Form

New Member 2025-26 2026-27
 Renewal



Your Membership Form can only be accepted if the **SQUARE** tick box is ticked, due to "personal data" regulations

PLEASE TICK BELOW

The Denby Dale Centre will need to hold/use personal identifying information to communicate with you and your emergency contact. At times the Denby Dale Centre collects photographic images during activities or on trips.

• I give the Denby Dale Centre consent to **collect, hold and use** personal identifying information to undertake the activities of the charity and that I can request to see any information held

• I understand that the Denby Dale Centre will only pass information on to health professionals in the case of my ill health and in my best interest of care and wellbeing, and do NOT sell information

• I give Denby Dale Centre consent to **take, hold and use** photographic identifying information to undertake the activities of its business including marketing purposes in print and online.

* The information you supply will be used by the Denby Dale Centre for administrative purposes within the terms of the Data Protection Act 1998.
 * The Denby Dale Centre shall not sell your information to any external third party – see Privacy Notice www.ddc.org.uk/privacy-notice .

• **GIFT AID:** I would like to register for GIFT AID for relevant payments to the Denby Dale Centre.

* By ticking Gift Aid, you are declaring that you are a UK taxpayer and understand that if you pay less Income Tax and/or Capital Gains Tax than the amount of Gift Aid claimed on all my donations in that tax year it is my responsibility to pay any difference.

MEMBER		For Invoicing (if different)
Name		
Address		
Postcode		
Landline or Mobile		
Email		
Emergency Contact or Carer Name		Emergency Phone No
GP Surgery	Name	Address & Telephone
Please do let us know anything to help us look after you (eg oxygen user, guide dog user, dementia, partially sighted, etc):		

Please Tick One

My mobility is OK I walk with a stick/frame I transfer from my wheelchair I stay in my wheelchair I require extra assistance

Mobility/assistance level:

Membership Payment

Member	£15.00	£
Supporter Member (if joining without intending to use services)	£15.00	£
<i>I would like to make a donation of...</i>		£
GRAND TOTAL OWED		£

Cheques payable to: **The Denby Dale Centre**
 BACs/Standing Order directly to: HSBC Huddersfield, A/c name **The Denby Dale Centre**, Sort 40-19-54, A/C 60005614
 Direct Debit (requires an email address) or **Credit/Debit Card** via invoicing

Signed:

Date:

Kirkburton Hub, 5a Riley Lane, Kirkburton, HD8 0RX
 01484 860077
hello@ddc.org.uk www.ddc.org.uk

Facebook @DDCprojects
 Twitter @TimeTogether1

Charity 1118128
 Company 5507412
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Member Diversity Report

To report how diverse our membership is to our funders or potential funders, we would be grateful if you could complete the following form. Thank you.

PART 1: Ethnicity

- Black Caribbean, African other.
- White White British, Irish, European, Other.
- Mixed White/Black-Caribbean, White/Asian, White/Black African, Other.
- South Asian Bangladeshi, Indian, Pakistani, Other.
- SE Asia Chinese, Philippino, etc
- Other Other ethnic groups
- Prefer not to say

PART 2: Disabilities

- Learning Disability
- Mental Health Disability
- Physical Disability
- Sensory Disability
- Other Disability
- No Disability
- Prefer not to say

PART 3: Age

- Under 16
- 16-19
- 10-34
- 35-44
- 45-45
- 45-64
- 65-74
- 75-84
- 84-99
- Over 100
- Prefer not to say

PART 4: Belief

- No Religion
- Buddhist
- Christian
- Hindu
- Jewish
- Muslim
- Sikh
- Other
- Prefer not to say

PART 5: Sex

- Male
- Female
- Other
- Prefer not to say

PART 6: Sexual Orientation

- Heterosexual
- Gay
- Lesbian
- Bi-Sexual
- Asexual
- Pansexual
- Undecided
- Prefer not to say

PART 7: Marital Status

- Single
- Married couple
- Unmarried couple
- Divorced
- Widowed
- Prefer not to say

PART 8: Gender – is the gender you identify with the same as your sex registered at birth

- Yes
- No

