**NEWCASTLE & NORTH TYNESIDE ALTERING IMAGES OF MENTALITY (AIM) GROUP**

***MEMBERSHIP FORM***

**Please complete either Parts A and B (both parts) or Part C.**

**Part A**

I wish to apply to become a member of the Newcastle and North Tyneside Altering Images of Mentality (AIM) Group.

I am over the age of 18 years.

I have read and agree to further the objects of the AIM Group.

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title \_\_\_

First Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Postcode \_\_\_\_\_\_\_\_\_\_\_

Telephone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you previously been a member of another mental health organisation? Yes/No\* \*delete as appropriate

If yes, can you please provide a contact name and telephone number so that we can seek a character reference from this organisation.

Name ­­­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

My (volunteering) history connected with vulnerable adults✞ is as follows:

|  |  |  |  |
| --- | --- | --- | --- |
|  | Date | Where? | Why Left |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

✞Please add brief details of your experience volunteering or working with vulnerable adults. The term ‘vulnerable adult’ refers to any person aged 18 and over “who is, or may be, in need of community care services by reason of mental or other disability, age or illness and who is, or may be, unable to take care of him or herself, or unable to protect him or herself against significant harm or serious exploitation”

**Part B**

I wish to attend general business meetings and to receive notes of these meetings (please tick).

I do not wish to attend general business meetings but would like to receive notes from them for information (please tick).

**Part C**

I no longer wish to be a member of the Newcastle and North Tyneside Altering Images of Mentality (AIM) Group (please tick).

Thank you for your time.

**Please E-mail back to:**

andrewaimmentalhealthorg@outlook.com

**or Please Post to:**

Jim Armstrong
Chair
Newcastle and North Tyneside Altering Images of Mentality (AIM) Group
c/o Chilli Studios

The Blackfriars Centre

Newbridge Street

Newcastle upon Tyne

NE12TQ