

# Guernsey Disability Alliance

Equality • Dignity • Inclusion

## APPLICATION FOR INDIVIDUAL MEMBERSHIP

Thank you for applying to become an individual member of the Guernsey Disability Alliance. We apologise for the legal terminology in this form but it is required for every organisation that is registered as a company 'limited by guarantee' [LBG]. The Guernsey Disability Alliance [GDA] is set up this way in order to ensure that our you can become a member of the GDA without any concerns about being held responsible for what we do. Signing the declaration below means the most anyone could ever ask you to pay in the (very unlikely) event of the GDA getting into financial difficulties is £1.

**Please fill in your name below and sign the declaration, then turn over to give us your contact details.**

..... (insert name of individual)  
applies for membership of the Guernsey Disability Alliance LBG, reg no 55102, a Company Limited by Guarantee [without a Share Capital] (the "Company").

In accordance with the Memorandum of Incorporation of the Company, whilst the liabilities of members is limited, each member undertakes to contribute such amount as may be required (**not exceeding £1**) to the Company's assets if it should be wound up while you are a member or within one year after such membership ceases, for payment of the Company's debts and liabilities contracted before such membership ceased, and of the costs, charges and expenses of winding up.

In signing this form you acknowledge this undertaking and confirm that you will be willing to contribute up to the amount of £1 should you be called upon to do so.

Signature: .....

Date: .....

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### For GDA use only:

The Directors have resolved at their meeting on ..... to admit  
..... as a member of the Company.

Signed: ..... Date: ..... (Director)

Applicant notified and entered into Register:

Signed: ..... Date: ..... (Hon. Sec.)

# YOUR CONTACT DETAILS FOR THE GDA MAILING LIST

Full Name		
Postal Address		
Email Address		
Phone Number		
Mobile Number		
Facebook Name (if you are happy to be contacted on Facebook)	Facebook: <a href="http://www.facebook.com/GuernseyDisabilityAlliance">www.facebook.com/GuernseyDisabilityAlliance</a>	
Twitter Name (if you are happy to be contacted on Twitter)	Twitter: <a href="https://twitter.com/GDA_Disability">@GDA_Disability</a>	

**Media Consent:**

Sometimes we take pictures of our events to display on our website, Facebook page, Twitter account, or print media. These pictures are normally of informal groups. We can normally provide you with a digital copy of the picture if requested. Please indicate whether you consent to being included in any pictures published as above.

- YES, I consent to my image being used for the purposed described above.
- NO, I do not consent to my image being used by the Guernsey Disability Alliance.

Signature: ..... Date: .....

**N.B.** The GDA is required under its Memorandum of Incorporation to hold and maintain a Register of Members, available on request.

**Please return this form to: Guernsey Disability Alliance, First Floor (EAST), Island House, La Grande Rue, St. Martins, Guernsey, GY4 6RU.**

We take your privacy seriously and are committed to protecting your personal information. We aim to be clear and open about our data and security practices. Where we ask you to provide us with any information by which you can be identified, you can be assured that it will only be used in accordance with our privacy statement and in line with the General Data Protection Regulation (GDPR) 2018.