

Community Action Fareham

Local Organisation's Information for Public Directory

Organisation Name

Charity Number (if appropriate)

Contact Name

Role in Organisation

Contact Address

Post Code

Telephone Number

Fax

Mobile Number

Text / Minicom

E-mail address

Website address

Affiliated to a wider organisation

YES

NO

A branch of a wider organisation

YES

NO

If yes Name -

(only key affiliates)

Web address

Description.
what you do and
possibly what you don't
do.

Keywords

General Leaflet

(please send a paper copy too)

Do you have a general leaflet that you can provide in Word,
Publisher or pdf format?

YES

NO

Operational Times

e.g. Mon– Fri 9-5
Lunch closure etc

Usual Public Meeting place—if different to contact's address.

Are the premises reasonably wheelchair accessible?

YES NO

Is a loop system installed?

YES NO

Does your Organisation have a public Out of Hours Tel No?

YES NO

If Yes write number here

In which area does your Organisation operate. Please tick those that apply

1 All of Fareham

OR

2 Fareham Central

3 Portchester

4 Stubbington

5 Titchfield

6 Western Wards

7 Gosport

8 Hampshire

9 SE Hampshire

10 Wider

IMPORTANT NOTE!

These details could appear on a directory for public use. With this in mind, the contact details should be of the person who would deal with enquiries from members of the public. Any other contact details i.e. Chairman, manager etc, can be entered on the additional contacts section (page 4).

This Information can be for Community Action Fareham's use only, if you wish. However, if you are happy for it's wider use, please tick the relevant boxes below.

We wish to make this information available for public access though request, directory and website

We authorise this information to be shared with other Hampshire CVS for the purpose of research and minimising repeat data collection.

We authorise this information to be passed on to not-for-profit public databases such as Hantswebs Cousin, NHS Direct etc.

We will not publish any of the above details without a signature in the following box.

Signature

We wish to receive relevant community information

By

Telephone

Email

Post

From

Fareham Community Action

Others

No one

Community Action Fareham

Application for A Voluntary Organisation to become a Member

Please first read the leaflet "Membership of Community Action Fareham "

Name of organisation

Date Organisation was founded

Information given on this sheet will remain confidential to Community Action Fareham

Your Membership

Are all of your members individuals? YES NO

How many individual members do you have approx. ?

Otherwise, please describe your membership

Purpose of your Organisation

Does your organisation have a written constitution?

No Informal Charity Constitution Mem & Articles

Main Activities of your Organisation (continue on a separate sheet if you wish)

Management (Describe simply your Management structure)

Finance (what are your main sources of income?)

What do you hope to contribute to Community Action Fareham?

Name of Chairperson or Manager or Chief Employee
(Address if different to contact/directory form) i.e the person we would speak to about membership

Postcode

Telephone

Email

In what support is your organisation interested from Community Action Fareham?

Organisational Support		Charities Governance Advice	
Administrative Support (see Admin Lifelines Leaflet)		Setting up a group or charity	
Volunteering promotion or recruitment		Grant Application Advice and help	
Use of <i>Trustfunding</i> and other funding hep		Access to meeting room or rental of desk space	
Regular Issues of Newsletter or E-news		Freepost facilities	
Use of Community Transport by group/club		Access to training	
An entry in Community Directory		Www. Own domain and website or listing in our website	
Payroll Service or DBS Service		Policy and Quality briefings	

Before signing please check:

- **That directory information section is complete**
- **Whether additional members of your organisation would like to receive email/mailings**

Community Action Fareham is committed to enabling the widest possible participation and involvement in building community and increasing neighbourliness; hence policies of equal access and equal opportunities are important. Is your organisation's perspective consistent with that? And your group is open wo all within your remit? **Yes** **No**

Is your organisation committed to working in a "**Compact**" manner that is working collaboratively and respectfully with other groups and with partner organisations. If new, have you checked that the group is not duplicating the purpose and activity of another charitable organisation locally? **Yes** **No**

I understand that Community Action Fareham is a company limited by guarantee and Membership would involve limited liability which is £1. (only payable if we were to go into liquidation!)

Name **Position**

Signed **Date**

Your application will be considered by the Board of Trustee Directors whose decision will be final.

Please return to

The Chief Executive, Community Action Fareham, 163 West Street, Fareham, PO16 0EF

Registered Charity Number 1056395

May 13

Additional contacts may be added as representatives, to receive mailings or many can go onto the e-news list

Name	<input style="width: 95%;" type="text"/>	Role	<input style="width: 95%;" type="text"/>
Address	<input style="width: 98%; height: 50px;" type="text"/>		
Postcode	<input style="width: 250px;" type="text"/>	Telephone	<input style="width: 300px;" type="text"/>
Email	<input style="width: 98%; height: 30px;" type="text"/>		

Keywords Nominated Representative Mailing recipient E-news Other

E.g.. Treasurer, Secretary, Staff member, Committee Member