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**Voting Membership Form**

Would you like to be part of the great work

that we do at Sutton Mencap?

As a local charity, Sutton Mencap is accountable to its voting members. Voting membership is open to anyone who supports our aim of improving the lives of local people with a learning disability, their families and their carers.

Voting membership does not provide any greater access or entitlement to Sutton Mencap services, but by becoming a voting member you can:

* Help make sure that we stay accountable to local people with a learning disability, parents and carers and the wider community.
* Strengthen the voice of people with learning disability, their parents and carers.
* Demonstrate your support for the work we do.
* Vote at our Annual General Meeting.

All you need to do to become a voting member is to fill in your details below. We would also be grateful if you could complete the monitoring information over the page.

|  |  |
| --- | --- |
| First name |  |
| Last/ family name |  |
| AddressPostcode |  |
| Telephone no |  |
| Email address |  |

By completing this form:

* I agree to be a member of Sutton Mencap.
* In the unlikely event that Sutton Mencap should be wound up whilst I am a member or within one year of my ceasing to be a member, I will contribute an amount not exceeding £1 to the organisation’s assets.
* I declare my support and sympathy with the objects of Sutton Mencap as set out in its Memorandum of Association (if you need a copy, please contact us).

For information on how we use your data, please see the privacy notice overleaf.

Privacy notice

The contact information you provide will be recorded in our company register, which we have a legal duty to maintain. We will use it to contact you about our AGM and to inform you of your rights and responsibilities as a voting member under company law.

We would like to use you contact details to let you know about our services and activities. We also sometimes like to use photographs and videos of members and supporters in our publicity materials. It is up to you whether you allow us to do this. We will contact you separately to ask you to complete a Consent Form to cover these areas.

We also ask you to complete the attached equal opportunities monitoring form. This allows us monitor how well we are involving different sections of the community.

All the information you provide will be kept secure. It is not normally shared with external agencies, unless we have a legal requirement to do so.

**You have legal rights in relation to the data that we hold about you.** At any time, you or your carer can:

* Ask to see the information we hold about you. This is called a data subject access request. The ICO has produced guidance on how you can request this information. Visit <https://ico.org.uk/for-the-public/personal-information/>.
* Request that information is changed if it is inaccurate or out of date.
* Request that we delete the information that we hold about you (although we will keep information where we have a legal obligation to do so).
* Request that we stop using the information we hold about you.
* Change the consent you have given us about making contact with you.
* Complain to the Information Commissioner’s Office. Visit <https://ico.org.uk/concerns/> for more information.

How to contact us:

* Write to: Office Manager, Sutton Mencap, 8 Stanley Park Road, Wallington SM6 9RW
* Telephone us on 020 8647 8600
* E-mail info@suttonmencap.org.uk

To find out more about how we collect and use your information, please visit [www.suttonmencap.org.uk/about-us/how-we-use-your-data/](http://www.suttonmencap.org.uk/about-us/how-we-use-your-data/)

**Equal Opportunities Monitoring Form**

Sutton Mencap is committed to equality of opportunity. In order to monitor our progress we would like you to fill in this form. This information will be kept in the strictest confidence and used only for monitoring the effectiveness of our equal opportunities policy.

1. Are you ⬜ a woman ⬜ a man

2. How would you describe your ethnic origin?

 White ⬜ British

 ⬜ Irish

 ⬜ Gypsy or Irish Traveller

 ⬜ Any other White background (please describe)

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

 Asian or Asian British ⬜ Bangladeshi

 ⬜ Chinese

 ⬜ Indian

 ⬜ Pakistani

 ⬜ Any other Asian background (please describe)

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

 Black or Black British ⬜ African

 ⬜ Caribbean

 ⬜ Any other Black background (please describe)

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 Mixed ⬜ Asian and White

 ⬜ Black African and White

 ⬜ Black Caribbean and White

 ⬜ Any other Mixed background (please describe)

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 Other ethnic groups ⬜ Arab

 ⬜ Any other ethnic group (please describe)

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3. Do you have ⬜ a learning disability

 ⬜ a physical disability

 ⬜ a sensory impairment

 ⬜ mental health difficulties

4. Are you an unpaid carer for someone with a learning disability? ⬜ yes ⬜ no

**Thank you**