



Bournemouth Council for Voluntary Service

Registered Office, Boscombe Link, 3-5 Palmerston Road, Bournemouth, BH1 4HN
 Tel & Fax: (01202) 466130 Email: contactus@bournemouthcvs.org.uk

Friends of BCVS Application Form April 2011 - April 2012

Please print clearly in **black ink** and delete where applicable

1. Name of Organisation:	
2. Name of contact to whom information should be sent:	3. Tel:
	4. Fax:
5. Address:	
Postcode:	
6. Email address:	7. Website address:
8. Brief description of your organisation's aims and objectives:	
9. Is your organisation a: Statutory Agency / Educational Establishment / Business	
If other please describe:	
10. I enclose a remittance of £ 50 Cheque/Postal order/Cash made payable to Bournemouth CVS. Please tick if you would prefer us to invoice you <input type="checkbox"/>	
11. I agree to the above information being held on a computer and used for information purposes in accordance with the details registered under the Data Protection Act. I agree to abide by the members' code of conduct.	
12. Signed	13. Date:

BCVS office use only	Date:	Cheque Name:
Cheque No:	Society Cheque: Yes/No	Membership No:
Cheque Amount: £	Staff Signature:	

SUPPORTING VOLUNTARY AND COMMUNITY ACTION IN BOURNEMOUTH
 Community Development : Resources : Information : Training :
 Volunteering : Bournemouth Community Transport
www.bournemouthcvs.org.uk

