DISLEY PARISH COUNCIL GROUP MEMBERSHIP APPLICATION FORM							
Please use BLOCK CAPITALS and answer ALL questions.							
NAME OF ORGANISATION							
ADDRESS							
POST CODE:	TEL. No:						
EMAIL:							
NAME & ADDRESS TO WHICH INVOICES SHOULD BE SENT (if different from above)							
POST CODE:	TEL No:						
EMAIL:							
NAME & TEL. No. OF PERSON WE CAN CONTACT IN AN EMERGENCY							
	TEL. No.:						

ORGANISATIONAL STATUS (Please answer every question)							
Is your group:			YES	1	NO		
Profit-making? (Please state Co	mpany No. bel	low)					
A community/voluntary group?							
A statutory body?							
A registered charity? (Please state Charity No. below)							
OUR MINIBUSES MAY ONLY BE USED BY GROUPS INVOLVED IN ONE OR MORE OF THE ACTIVITIES LISTED BELOW. (Tick those with which your group is concerned)							
Education	Re	Religion					
Recreation	Sc	Social welfare					
Other activities of benefit to the community? (Please specify below)							

DECLARATION					
Our organisation agrees to abide by the terms and conditions as set out in the Disley Parish Council Minibus Hire Policy and we understand that any breach of these conditions may result in our group being expelled from membership.					
SIGNED:	NAME:				
POSITION:	DATE:				

FOR OFFICE USE ONLY					
Group Number					
Fee Received					