

IRISH ADVOCACY NETWORK MEMBERSHIP FORM

Please complete the form below if you have decided that you want to become a member of the IRISH ADVOCACY NETWORK.

Point 5 of the Articles of Association, constitution of the Irish Advocacy Network reads:

“The Irish Advocacy Network Membership is allowed on a group or individual basis. Full membership (with voting rights) is open to only service users or survivors of mental health difficulties, or groups that are wholly user-run and led. Associate membership is available to other interested individuals or groups.”

Please tick the relevant box below to confirm your eligibility to apply for membership of the Irish Advocacy Network.

I am applying for membership of the Irish Advocacy Network as:

An individual

A representative of a mental health group that is wholly user-run and led

A representative for Associate membership of interested individuals or group

If you have any problems completing this form or seek clarification, contact the Irish Advocacy Network by using the contact details at the end of the form, page 3.

Name in full	
<p>1. If representing a group that is wholly user-run and led.</p> <p>Please insert the name of the group you are applying on behalf of, include your position within the group (eg; Chair or Secretary) and contact address and post code for the group.</p>	
2.If applying for Associate membership	

<p>representing interested individuals or groups.</p> <p>Please insert the organization or group you are applying on behalf of, include your position within the group/organization (eg; Chair or Secretary) contact address and post code for the group/organization.</p>	
<p>3.If you are applying for membership as an individual.</p> <p>Please insert your home address with post code.</p>	
<p>Telephone (individual or on behalf of organisation/ group numbers 1 and 2 above):</p>	
<p>Email (individual or on behalf of organisation/ group numbers 1 and 2 above):</p>	

Please note that completed forms will go to administration at Irish Advocacy Network with your details placed on record. We are GDPR compliant and will hold your details protecting your right to privacy in accordance with the law. If you have any queries about your privacy, please send your enquiry by completing the form found on the Get in Touch page on our website.

Before you send the completed form to administration, we require your consent. Please read the statement below, sign and date directly beneath to indicate if you are happy to proceed.

I hereby give permission to the Irish Advocacy Network to place my personal details provided on this form on a data base allowing them to contact me with updates and send invites to annual events organised through/by said organisation.

Any questions I might have with regards my right to privacy have been answered to my satisfaction.

Signed _____ Date _____

Please return this form to:

admin@irishadvocacynetwork.com

Or post to:

**Irish Advocacy Network
First Floor,
The Tannery Building,
53-56 Cork Street,
Dublin,
D08 X31R**

For enquiries, phone: (01) 872 8684