

Clyde Valley Housing Association Membership Application Form

I wish to become a member of Clyde Valley Housing Association and enclose £1.00 membership fee for a lifetime share.

PLEASE PRINT IN BLOCK CAPITALS

1.	Nam	ie:						
2.	Addr	ess:						
3.	Ema	il address:						
4.	Date	of Birth:						
5.	Осс	upation:						
6.	Plac	e of Work						
7.	l am	am over the Age of 16				Yes	No	
8.	l am	I am a tenant of Clyde Valley Housing Association				Yes	No	
9.	I am a service users of the Association					Yes	No	
10.	l am	I am a person who support the objects of the Association				Yes	No	
11.	An C	An Organisation sympathetic to the objects of the Association.				Yes	No	
12.	Please briefly tell us why you wish to be a member of Clyde Valley Housing.							
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13.	Please briefly tell us of any expertise you may have which would benefit the business of the organisation.							
14.	14. Please tell us if you would be interested in joining the Board of Management should vacancies arise.							
	vaca	andes anse.						
Signed:				Date:				
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Please Return Form To:

Lisa Hughes Clyde Valley Housing Association Ltd 50 Scott Street Motherwell ML1 1PN

- (T) 01698 268855
- (E) <u>lisa.hughes@cvha.org.uk</u>