Application For KMA Membership

1. Name of Applicant: ………………………………………………………………………………………………………

2. Address:……

……………………………………………………………………………………………… **Post Code:**……………………

(Please enclose proof of residence. This may take the form of a utility bill; a bank statement showing the address and name only, or an electoral notice. KMA reserves the right to make further additional enquiries if necessary).

3. Telephone No: **Home:**…………………………………… **Mob:**………………………………………

4. Email: (*Mandatory*)……………………………………………………………………………

5. Age:…………………   **6. Marital Status:**………………………

7. Occupation: …………………………………………………………………………………

8. No of years resident in the RBK:…………………………………………………………

9. Eligibility:

Have you any past or pending court convictions? (Yes / No)

Are you a member of any charity or organisation? (Yes / No)

If yes, please state name of organisation and your position:

………

………

Can your position in the organisation result in a conflict of interest and negatively affect your output as a member of KMA? (Yes / No)

Do you have a particular interest or reason for joining the KMA?

………

Do you have a specific experience (social service, family background or general Interest that will help us support and deliver the goals of this organisation?

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AREAS OF EXPERTISE AND SKILLS (PLEASE MARK WITH A TICK and a brief description of how you could contribute your skills to the KMA)

Administration
Board/Committee Experience
Campaigning
Marketing
Fund Raising
Finance
Charity/ Voluntary Governance
Conflict Resolution
HR & Training
IT Systems
Legal
PR & Communications
Community Relations
Property
Project Management

Voluntary Sector
Other
Are there specific areas of work within the organisation you would like to be involved in?

I hereby apply for membership of the Kingston Muslim Association and will endeavour to further the aims and objectives of the Association.

Declaration:

I,……………………………………………….…... Undertake to abide by the Constitution, and its bylaws and conduct myself appropriately at all times. I acknowledge that any action on my part that brings the KMA into disrepute or undertake such action that causes harm to the organisation may result in the termination of my membership.

I further declare that the information provided in support of my application is true to the best of my knowledge.

Signed:…………………………………………..   **Date:…………………………**

Member Proposing………………………   **Member seconding……………………**
(*Mandatory*)   **(*Mandatory*)**

For Office Use Only:
Date:

Accepted: Yes / No   *Further information required: Yes / No*

Rejected: Yes / No

Additional comments:

Date of Issue:……………………………….   *Date of Receipt:…………………………*