

## FRIEND OF ACT MEMBERSHIP APPLICATION

ACT membership is FREE to parents, carers, friends and family members, self-help groups and any individual who is interested in the work of ACT.

### 1 Your details

Name

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Address

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Postcode

Telephone

Email

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### 2 Membership declaration

I wish to become a member of ACT and understand that this means I will also become a member of the company which carries a limit of liability of £1.00.

Signature

Date

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### 3 Data protection declaration

ACT will not disclose your details to any third parties.

How did you hear about ACT?

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Would you be interested in learning how you can take a more active role in ACT's work? Yes  No

### 4 Please return this form to

ACT, Orchard House, Orchard Lane, Bristol BS1 5DT

Telephone 0117 922 1556 Fax 0117 930 4707 Email [admin@act.org.uk](mailto:admin@act.org.uk)