



APPLICATION FOR MEMBERSHIP

I am interested in becoming a member of Ochil View Housing Association. The following details are relevant to my application:

Name:

Address:

.....

Post Code

Telephone No: (Home)(Work).....Mobile.....

Email

Occupation:

Please answer the following questions in support of your application:

1. Are you over 16 years of age?

Yes / No

2. Are You a Tenant / Service User of the Association?

Yes/No

3. Have you previously been a member of the Association?

Yes / No

If Yes, please state (and give reasons for no longer being a member)

4. Are you aware of any conflicts of interest which may exist which, even allowing for the disclosure of such an interest, may adversely affect the work of the Association?

Yes / No

If Yes, please state

5. Please Provide a Statement as to your Interest in the Activities of the Association

Other Relevant Information/ Membership of Other Organisations

Please State Any Special Requirements

Signed: Date:

Please note that membership costs £1.00.

Please send your completed application and £1.00 to:

**The Secretary, Ochil View Housing Association Ltd., Ochil House, Marshall, Alloa
FK10 1AB**

April 2015