**LONDON ACES HUB MEMBERSHIP FORM**

**Thank you for your interest in joining our Network!**

**Operational Nature**

The format and operational functioning of the *London ACEs Hub (LAH) Community Interest Company*, including its organic network nature, are based on two core documents as follows:

* [**LAH Articles of Association**](https://a94b9ff2-2b42-423f-a541-9ec8befe8e21.filesusr.com/ugd/3f7b5b_a226c241771248dd8fa4417246e8ec1a.pdf)
* [**LAH CIC Guide**](https://a94b9ff2-2b42-423f-a541-9ec8befe8e21.filesusr.com/ugd/3f7b5b_68a330e451bb40698deaa413f874e81d.pdf)

Please take some time to read them as they are the constitution and reference of our work. The *Articles* address our CIC objects and the legal accountability of the Directors and the *CIC Guide* describes the Directors' delegations and the operational format of our Community Interest Company.

**Self-Care and Mutual Care**

To ensure that we all do our best to develop a welcoming and safe space to everyone, LAH Members, including Directors, Coordinating Group and Network Members, are required to comply with shared commitments and principles stated in the:

* [**LAH Privacy Notice**](https://www.londonaceshub.org/_files/ugd/3f7b5b_78a81451e44c4d60a2d91be9651b38bc.pdf)
* [**ACE-Aware and Trauma-Informed Safeguarding Policy and Procedures**](https://www.londonaceshub.org/_files/ugd/3f7b5b_79343bf5ea834e19b2de8c81e334c163.pdf)

Please read these documents thoroughly and let us know if you feel comfortable to committing to them.

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**Your Details and Membership Option**

If you are happy with the information so far, please feel in your membership details below.

**Personal Details**

**Full Name:**

**Address:**

**Main contact number:**

**Motivation to join**

*Please share with us in a few words why you would like to join our Network, including your main interests related to ACEs, trauma-informed care and resilience.*

**Membership Category/ies**

*Feel welcome to select more than one if applicable.*

[ ] **Survivor** - Individuals with lived experience of adverse childhood experiences (ACEs) and/or trauma.

[ ] **Community Advocate** - Individuals involved in community development and advocacy.

[ ] **Students** - Individuals attending full or part time education as their main activity.

[ ] **Professional** - Individuals working in professional fields such as statutory or non-statutory services or self-employed practitioner.

[ ] **Organisation Representative** - Individuals (maximum two) representing one particular organisation committed to ACEs awareness.

**Yearly Membership Payment Option**

*Fee option does not impact members’ benefits. All LAH members have the same rights and responsibilities.*

[ ] **£50** - Supporting Member (£25 fee + £25 donation)

[ ] **£25** – Full Member

[ ] **£5** – Concession Member (Students and individuals on low income)

**Payment method**

I send enclosed with this form the amount above selected via (please select one):

[ ] Cash [ ] Cheque

[ ] Bank transfer made to (please enclose slip or another proof of transfer):

**The Co-operative Bank Community Directplus Account**

Account Name: **London ACEs Hub**

Account number: **67224463**

Sort Code: **089299**

**Membership Agreement**

 **[ ] I confirm that the information here provided is accurate and that I have read and agree with the London ACEs Hub’s:**

* **Articles of Association,**
* **CIC Guide,**
* **Privacy Notice, and**
* **ACE-Aware and Trauma-Informed Safeguarding Policy and Procedures.**

**Signature:**

**Date:**

**For LAH Office use only –**

**Membership processed by (enter full name):**

**Date:**