



# SERV Norfolk

[www.servnorfolk.org.uk](http://www.servnorfolk.org.uk)

## Membership Application Form

Thank you for offering your help to SERV Norfolk.

Please complete the form below, noting that a mobile phone and an active e-mail address are required.

Riding and driving applicants only: please note that our groups are geographically located. If you are unsure whether you will be in a suitable location, please email your post code to the membership address for checking.

For more information, please e-mail our Membership Secretary at [membership@servnorfolk.org.uk](mailto:membership@servnorfolk.org.uk)

*All personal and sensitive information held about you by SERV Norfolk will be held in strict confidence within the terms of the Data Protection Act 1998*

Please complete in **BLOCK CAPITALS**

| Personal Details – all applicants  |               |                               |           |
|--|---------------|-------------------------------|-----------|
| Forename   | Surname       |                               | Known As  |
|  |               |                               |           |
| Date of Birth  | Home Phone No | Mobile Phone No               |           |
|  |               |                               |           |
| Full Address inc. Village if applicable  |               | Post Town & County            | Post Code |
|  |               |                               |           |
| e-Mail address (in blocks please)  |               | Current / Previous Occupation |           |
|  |               |                               |           |
| Do you suffer any medical condition(s) that may affect your ability to drive, ride or carry out any other functions relevant to working with SERV? |               |                               |           |
| Yes – details below (These will be held in strict confidence)  |               |                               | No        |
|  |               |                               |           |

| Next of Kin Details – all applicants |                 |                     |
|--------------------------------------|-----------------|---------------------|
| Forename                             | Surname         | Known As            |
|                                      |                 |                     |
| Full Address (if different to above) |                 | Post Town & County  |
|                                      |                 |                     |
| Home Phone No                        | Mobile Phone No | Relationship to you |
|                                      |                 |                     |

**What kind of help are you prepared to offer?** – all applicants. Please tick (✓) all your preferences. Please don't think that we expect everyone to be able to do everything, be realistic about your personal and home situation and the time you can offer. Riders & Drivers should note that they will need to collect rostered duty vehicles.

| Events / Fund Raising <i>Note 1</i> | Donor Breast Milk Co-Ord  | Media Communications                    | Corporate Sponsorship | General Support        |
|-------------------------------------|---------------------------|---|-----------------------|------------------------|
| ✓                                   |                           |   |                       |                        |
| Night / Day Controller              | Riding SERV Norfolk Bikes | Driving SERV Norfolk Cars <i>Note 2</i> | Driving Your Own Car  | Other (please specify) |
|                                     |                           |   |                       |                        |

*Note 1 - From the AGM of 28 Jul 17 all new membership applicants will be required to participate in a minimum of four (4) events per annum. Events include: Presentations / Supermarket Collections / Festivals, Fetes and Fayres / Sponsor or Charity of the Year events*

*Note 2 - It is expected that riders also holding a full car (manual) licence will be available to drive rostered SERV Norfolk cars on shift during weather periods when bikes are off the roster.*

| About your licence and relevant qualifications – all drivers, riders and fundraisers   |  |  |
|--|--|--|
| Driving Licence Number   |  |  |
| What type of licence do you hold?  | Do you have any motoring convictions in the past five (5) years, currently or pending? |  |
| <i>e.g. Full Car, Manual or Automatic / Bike</i>                                       | <i>No or if Yes give details</i>   |  |
| Have you had any accidents in the past five (5) years?                                 | Do you have any unspent convictions under the Rehabilitation of Offenders Act, 1974?   |  |
| <i>No or if Yes give details</i>   | <i>No or if Yes give details</i>   |  |
| Do you hold an Advanced Riding qualification? IAM, RoSPA, Police Class 1 or equivalent | What month / year did you obtain it?   | When were you last assessed? <i>Note 3</i> |
| <i>No or if Yes give details</i>   |  |  |

*Note 3 - Our rider applicants MUST have an advanced riding qualification from one of the organisations mentioned and it must have been (re)validated in the past three (3) years. If not within the past three years, you must arrange a re-test and pass on a copy of the certificate.*

|  |  |
|--|--|
| Do you hold a current First Aid certificate? | Have you completed a First Bike on Scene course? |
| <i>if Yes, when and who with</i>             | <i>if Yes, when and who with</i>                 |

Registered Charity Number 1148669

| <b>Your present vehicles (if appropriate)</b> – all drivers and riders |              |                            |                        |                 |
|--|--------------|----------------------------|------------------------|-----------------|
| Type   | Make         | Model                      | Approx. Annual Mileage | Reg. No         |
| <i>Bike</i>  | <i>Honda</i> | <i>ST1300 Pan European</i> | <i>3500</i>            | <i>AB123CDW</i> |
|  |              |                            |                        |                 |
|  |              |                            |                        |                 |
|  |              |                            |                        |                 |
|  |              |                            |                        |                 |

### DECLARATION

**Please complete and sign below to confirm that you have provided accurate information and agree with the following statements:**

- I can confirm that I hold a full UK licence; my vehicle is fully insured and road legal; my insurance company is aware of the role I intend to undertake with SERV if applicable (use of own car). (delete if inapplicable)
- I confirm that I will provide details of insurance, road tax, MOT, ownership on request, if required. (delete if inapplicable)
- I understand that I will be expected to assist with at least four (4) events per annum on behalf of SERV Norfolk.

Signed:

Date:

Print full name:

### Please return this completed form together with:

- A photocopy of your driving licence (paper or card, both sides).
- Copies of all advanced qualification, requalification certificates (if applicable) and your current membership card.
- Your driving licence check code from the <https://www.gov.uk/view-driving-licence> site.  
(The code *MUST* be exactly as it appears on the site as it is case sensitive and is subject to an annual recheck)

**To:**  Mr Les Spencer, SERV Norfolk Membership, 17 Newfields, Sporle, King's Lynn, Norfolk, PE32 2UA

- Please also email a passport style photograph (.jpeg format) with your name as the subject. (Head and shoulders against a plain background) to [membership@servnorfolk.org.uk](mailto:membership@servnorfolk.org.uk) for your SERV ID Card.