



Registered address – Vivaldiplantsoen 100, 3533 JE Utrecht, The Netherlands.
Chamber of Commerce No 71898190 (KvK Utrecht, the Netherlands)

CirclesEurope Membership Application

CirclesEurope is the registered European Association for Circles of Support and Accountability (CoSA) agencies, and those organisations and individuals in sympathy with and supportive of CoSA.

A Privacy Notice accompanies this membership application form to provide assurance of how your data will be processed in accordance with the General Data Protection Regulations (GDPR).

FORMS OF MEMBERSHIP: FULL AND ASSOCIATE.

- Full Membership is restricted to those agencies which are directly providing Circles of Support and Accountability in compliance with the CirclesEurope Definitions and Standards as set out in the European Handbook, and those agencies which serve in an umbrella capacity for those organisations. *Please complete SECTION A*
- Associate Membership is for:
 - a) those organisations which through their operational, academic or other activities are interested in contributing to the development and furtherance of CirclesEurope and its activities, and in being kept up to date with the service at a European level.
Please complete SECTION B
 - b) those individuals who in a personal capacity are interested in contributing to the development and furtherance of CirclesEurope and its activities, and in being kept up to date with the service at a European level.
Please complete SECTION C

Fee structure

The cost of annual membership per category is currently

Full membership (Section A) : **€40.**

Associate membership - Organisational (Section B):**€25.**

Associate membership – Individual (Section C) : **€10**

Please make payment with your Membership application by BACs (UK applicants) to;
NL73 RABO 0332 4136 67 (BIC code RABONL2U)

APPLICATION

For FULL MEMBERSHIP go to Section A

For ASSOCIATE MEMBERSHIP for organizations go to Section B

For ASSOCIATE MEMBERSHIP for individuals go to Section C

SECTION A FULL MEMBERSHIP (please complete)

A1) Name of agency / organisation providing Circles:

A2) Address for communications:

A3) Name of key contact for CirclesEurope purposes:

A4) Position in agency / organisation:

A5) Email address:

A6) Telephone number (with national prefix)

A7) Geographical cover of Circles provision; (please specify)

- one or more localities
- regionally
- nationally

A8) Number of Circles currently being provided ()

A9) Confirmation of agency / organisation compliance with the CirclesEurope Definitions and Standards.

I confirm that the Circles of Support and Accountability as provided by (name of organisation)

are done so in compliance with the CirclesEurope Definitions and Standards and that it is the commitment of the organisation to continue to do so, and to pay the annual Full Membership fee of €40.

Signed by (name)

Signature:.....

Date

Please send the completed and signed application form in pdf format to: info@circleaseurope.eu

SECTION B ASSOCIATE MEMBERSHIP (for completion by organisations)

B1) Name of agency/organisation:

B2) Address for correspondence:

B3) E mail address:

B4) Name of key correspondent for CirclesEurope purposes:

B5) Position in organisation:

B6) Nature of interest of organisation (e.g. academic / service delivery / advocacy):

B7) Geographical area of interest (e.g. individual European state / Europe / other...please specify):

B8) Confirmation of agency / organisation support

I confirm that, on behalf of, (name of organisation)

that the organisation is fully supportive of Circles of Support and Accountability as set out in the European Handbook, and to pay the annual Associate Membership fee for organizations of € 25.

Signed by

Signature

Date:

On behalf of

(agency / organisation)

Please send the completed and signed document in pdf format to:
info@circleseurope.eu

SECTION C ASSOCIATE MEMBERSHIP (for completion by individuals)

C1) Name:

C2) Address for correspondence:

C3) E mail address:

C4) Nature of interest in and previous involvement with CoSA: (e.g professional, volunteer, other)

C5) Confirmation of individual sympathy and support:

I confirm that I am fully supportive of Circles of Support and Accountability as set out in the European Handbook and to pay the annual Associate Membership fee for individual supporters of €10.

Signed by

Signature:

Date:

Please send the completed and signed document in pdf format to:
info@circleseurope.eu

Thank you for your support!