

RAPAR Membership Application Form

(Refugees and Asylum seeker Participatory Action Research)

Company Limited by Guarantee no. 04387010. Registered Charity no. 1095961
RAPAR, 6, Mount Street, Manchester, M2 5NS, UK (access to our office is via Bootle Street)
Landline: 0161-834-8221, Web address: www.rapar.org.uk

Name:	Address:	Gender: (please circle) M / F
Country of Birth:	Age Range: (please circle) Under 12 , 12–15 , 16-17 , 18-24 , 25–35 , 36–45 , 46–55 , 56-65 , Over 65	
Tel/Fax:	Email:	
How old are your children?	Number of boys and girls with you?	
Partner/Husband/Wife/other Dependent (e.g. mum/dad/sister) with you?		
Educational Qualifications? From Where?	Main areas of interest and/or knowledge:	
Languages spoken/written:	Name Of Person/Organisation Who Introduced You To RAPAR:	

I would like to become a Member of RAPAR. I agree to abide by its published Constitution and I support its primary stated aim:

“To relieve refugees, asylum seekers and other displaced persons within the Manchester, Salford and Trafford areas who are in need, hardship and distress because of their social and economic circumstances by such charitable means as the Trustees shall determine including the advancement of education, relief of poverty, the preservation and protection of good health and promotion of personal safety and security.”

I agree to my name and details being kept on a computer database, for the sole purpose of maintaining communication with me. I understand this information will not be disclosed to any Third Party.

Name:

Signature:

Date: