



WELCOME TO SURF

MEMBERSHIP FORM

Please note any **information** that you complete on this form is **confidential**.

Name.....

Contact Address.....

.....

Phone number.....

Gender.....Female Male

Date of Birth.....

Which areas of BCHA's services have you used in the past?

Women's Services Adult Services Shared Housing

General Housing Floating Support Hyped

St Paul's Nightshelter Learning Services Western Area

Customer services/ Reception Other

Optional Questions.

Do you consider you have a disability?Yes No

What is the nature of your disability?

What is your ethnic background?

White British White Irish White Other

Asian British (Indian) Asian British (Bangladeshi)

Asian British (Pakistani) Asian British (Other)

Black British (Caribbean) Black British (African)

Black British (Other)

Chinese Other Mixture of ethnic origins

Prefer not to say

What days/ times would suit you best to attend a SURF meeting?

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On signing this you agree to follow the rules and constitution of SURF (copies available from SURF)

Signed..... Dated.....

For more information please see

www.bcha.org.uk

contact number 07966 808839.

C/O BCHA, St Swithuns House, 21 Christchurch Road, Bournemouth BH1 3NS

Or contact your key worker.