



## **MEMBERSHIP APPLICATION FORM**

**Title:**  Mr  Mrs  Ms  Dr

**First Name:** \_\_\_\_\_

**Surname:** \_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_

**Post Code:** \_\_\_\_\_

**Tel No:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Are you over 18?**  Yes  No

**Are you a UK Citizen?**  Yes  No

**Would you be interested in volunteering for the Mosque?**  Yes  No

Our bank details are Barclays Bank Plc., account no: 50194638, sort code 20-22-67. Please use the reference as 'Membership & your name' if you are paying by bank transfer.

I consent to receive communications from CICA with general updates from the Management Committee, invitations to member meetings, updates regarding events and/or communications in respect of volunteering opportunities

**Note:** You can opt out of receiving communications by providing notice in writing (i.e. email, letter, text message)

It is the aim of the CICA to make the Mosque a welcoming and peaceful place for all worshippers no matter their background. The following information has been requested to improve the Mosque whether it be better accessibility or to hold classes in different languages. The information provided will not be shared and will remain confidential.

**What is your place of Birth?** \_\_\_\_\_

**What is your primary language?** \_\_\_\_\_

**Do you speak any other languages?**  Yes  No

**If yes, please provide details:** \_\_\_\_\_

**What ethnic group would you say you belong to:**  White (*English, Welsh, Scottish, Irish etc*)

Asian / Asian British (*Bangladeshi, Indian, Pakistani etc, please tick accordingly.*)

Black / African / Caribbean / Black British

Arab

- Persian
- Mixed / Multiple ethnic groups
- Other (please specify) .....

**Do you consider yourself as**

- A Sunni Muslim OR  A Shia Muslim
- Other (please specify) .....

**Do you consider yourself to have a disability?**

- Yes  No

**If yes, please provide more details:** \_\_\_\_\_

\_\_\_\_\_

By signing this form, I hereby certify that the above information is accurate and include the annual membership fee with my application. If my application is accepted, I will ensure that my actions are in the best interests of the Mosque and will ensure that my behaviour at member meetings, at the Mosque and outside is that expected from a responsible Muslim. I am also aware that if my behaviour and/or actions are deemed to be against CICA policy and constitution, I may face disciplinary proceedings which may result in the suspension or termination of my membership.

**Membership fee (subject to reviewed by the Committee time to time): Minimum Payment £20.00**

***Note:** Membership fee will be reviewed annually by the CICA Management Committee. 100% of all membership fees will be donated to the mosque. The application will be considered by the CICA Management Committee who can refuse the application by providing relevant grounds to do so. The CICA Management Committee will not tolerate any aggressive or threatening behaviour towards any members or the Management Committee itself.*

**Name:** \_\_\_\_\_

**Signed:** \_\_\_\_\_

**Dated:** \_\_\_\_\_

**Gift Aid (please tick)**

Gift Aid is one of the simplest and most effective ways of giving charity. It is a scheme introduced by the Inland Revenue which allows us to reclaim the basic rate that you pay as a UK taxpayer. That's an extra 25p for every £1 you give. **This is at absolutely no extra cost.**

I confirm that I am a UK taxpayer and would like the Colchester Islamic Cultural Association to treat this donation I have made as well as any future donations as Gift Aid, until I notify the otherwise. Please remember that what you pay in income/capital gains tax must at least equal the amount we reclaim against your gift

<b>For official use only:</b>	
Payment received by:	_____
Date of payment:	_____
CICA membership No:	_____