APPLICATION FOR MEMBERSHIP

(Individual Member)



If you require this form in an alternative format please contact admin@fpha.org.uk

TELEPHONE NO.: DATE OF BIRTH: Why do you want to become a member of Ferguslie Park Housing Association? Declaration I wish to become a member of Ferguslie Park Housing Association Ltd. I agree to notify in writing to the Registered Office any change of my address within three months of moving. I understand that if I do not notify the office of my change of address within three months then my membership will be terminated. I understand that I may withdraw from membership by giving one month's notice in writing to the Secretary of the Association. I enclose the sum of one pound (£1) to purchase my SHARE which is non-refundable. Signed: Date:	FULL NAME:	
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☐ Tenant of Ferguslie Park Housing Assoc. ☐ Non Tenant (in Association area)	_	<u> </u>
Non Tenant (III Association area) Non Tenant outwith Ferguslie Park	,	,





FOR ASSOCIATION USE ONLY

Membership Number	
Application submitted to Comm	ittee on:
Application Approved:	Date:
	Signature of Committee Member:
Application Not Approved:	Date:
	Signature of Committee Member:
	Reasons for Refusal:
£1 SHARE received:	Date:
£1 SHARE refunded (if application	on not approved):
Date:	Initials: