




Please read this form carefully.
You need to put a circle in the box
for the answer you want to give.



 <p>I am happy for Opening Doors to keep holding my personal information.</p>	<p>Yes <input type="checkbox"/></p> <p>No <input type="checkbox"/></p>
 <p>I want to hear about what you are up to and the training you offer.</p>	<p>Yes <input type="checkbox"/></p> <p>No <input type="checkbox"/></p>
 <p>I have a learning disability and I want to be a full member of Opening Doors.</p>	<p>Yes <input type="checkbox"/></p> <p>No <input type="checkbox"/></p>
 <p>I do not have a learning disability and so I would like to be an associate member of Opening Doors.</p>	<p>Yes <input type="checkbox"/></p> <p>No <input type="checkbox"/></p>
<p>Write your name here</p> 	
<p>Please sign here</p> 	<p>Please put the date</p> 

If you say no to us getting in touch, that will not stop you being able to have information and advice help from us. It is ok to say no.

38a Bull Close
Norwich
NR3 1SX

Please put this form in the envelope we have given you.
You can hand it to a member of staff or post it to us.