

I CAAN

Committee

CHAIRPERSON - Gary Tomlinson

DEPUTY CHAIRPERSON - Jane Parker

SECRETARY - Jen Milburn

TREASURER - Andrew Milburn

ACCOUNTS ADMIN - Lisa Burrell

PUBLICITY – Lindsey Carter

ACTIVITY ORGANISER - Shani Tomlinson

FUNDRAISING - Lynne Thornton

CHILD PROTECTION OFFICER – June Stothers

COMMITTEE MEMBERS - Graham Shand
- Amanda Denwood

TELEPHONE NO: 07519 731090

WEB SITE: www.icaan.org.uk

EMAIL: info@icaan.org.uk

ADDRESS:

I CAAN

PO Box 81

Cockermouth

CA13 3AQ

Charity Number – 1156551

I CAAN

*Independent Community
Autism Activity Network*

Membership Registration Form

TELEPHONE NO: 07519 731090

EMAIL: info@icaan.org.uk

I CAAN

Independent Community Autism Activity Network

ADDRESS: I CAAN
PO Box 81
Cockermouth



Independent Community Autism
Activity Network

I CAAN is a group of volunteers who organise activities for people with ASD and their families in Copeland and Allerdale. Activities include swimming, trampolining, soft play, bowling, archery, gymnastics, keep fit, horse riding, craft sessions and general sports sessions.

Activities

Members of I CAAN will be sent details of activities by email or post. You must register for each activity you want to take part in by the stated closing date. Certain activities may have an additional charge, which must be paid before the closing date. You must sign in at each activity.

YOU WILL ALWAYS BE RESPONSIBLE FOR THE SUPERVISION OF THE PERSON IN YOUR CARE.

Membership

There is annual membership fee of £10 per family due on 1st January each year. Existing members will be sent a reminder to renew their membership, if no payment is received one month after the reminder they will no longer be a member of I CAAN and will need to reregister to rejoin. It is the member's responsibility to inform I CAAN of any changes in their contact details.

Governance

Details of I CAAN's constitution and child protection policy can be found on our website www.icaan.org.uk, or you can request a copy from us.

Privacy statement

We will retain your details for the sole purpose of administering the membership of I CAAN and organising activities for the members. Your details will not be shared with any third parties and will be removed on the termination or lapse of your membership.

Registration Details - Please list below details of the main contact who will be eligible to vote at I CAAN meetings.

Name			
Address			
Postcode			
Telephone Number		Mobile Number	
I/ we live in		Allerdale / Copeland (please delete as appropriate)	
Email Address			
Date of Birth		I have an ASD diagnosis	YES / NO

*If you have supplied an email address we will use this as the primary method for notifying you of activities.

Please list below those people to be included in the family membership, indicating the person(s) with a diagnosis. (Limited to the parents/guardian or siblings of the person with the diagnosis).

Name of person 2			
Date of Birth		I have an ASD diagnosis	YES / NO
Name of person 3			
Date of Birth		I have an ASD diagnosis	YES / NO
Name of person 4			
Date of Birth		I have an ASD diagnosis	YES / NO
Name of person 5			
Date of Birth		I have an ASD diagnosis	YES / NO

I have enclosed payment of the membership fee of £10 per family (Please make cheques payable to I CAAN)			YES / NO

I have paid by bank transfer (Bank: HSBC Sort Code: 40-18-03 Account Number: 21281836)			YES / NO

I have enclosed a donation	YES* / NO	*Please specify amount	£

I would like to Gift Aid my donation Please indicate your permission by ticking the box

I authorise the use of photographs taken at activities to promote the work of I CAAN, no names will be listed with any photographs used.			YES / NO

Signature

Please return your completed registration form and membership fee to the address overleaf.