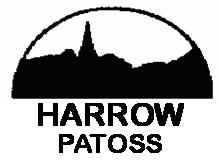
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***Membership Form***

**Why join Harrow Patoss?**

* Regular meetings which include guest speakers, sharing of new ideas and latest materials
* Opportunity to join the tutor and /or assessor register
* Opportunity to join the assessors’ group
* Regular newsletter on upcoming events
* Resources bank including videos, assessment and teaching materials
* A chance to meet other members

Please complete the form below and by returning this information, you are confirming you have read and accepted the data protection terms outlined below.

Please make a funds transfer payment of £20 (or £15 if you are a member of national PATOSS) to:

HARROW PATOSS

SORT CODE 20-92-63

ACCOUNT 53254941

**Please put your first and surname as the reference**

**PLEASE NOTE THAT ANNUAL SUBSCRIPTIONS ARE RENEWED EVERY SEPTEMBER**

**Please return the form to: laura@bloombergs.co.uk**

**Membership details**

|  |  |  |
| --- | --- | --- |
| Name |  | Date Joining: \_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ |
| Address |  | |
| Post code |  | |
| Contact Number | Home: Mobile: | |
| Email |  | |
| National Patoss No (*if applicable)* |  | |
| Are you a SENCo, specialist teacher, parent? Please state | Current Employment | |
| Qualifications Held |  | |

**Tutor Register Additional Information**

If you would like to be added to our tutor register database, please complete the additional information below. By filling in the details, you are giving your consent for Sharon Goldstone, the Tutors’ Officer, to pass on your name and contact number to a parent who is looking for a tutor.

|  |  |
| --- | --- |
| Specialist Teacher Level 5 (or equivalent) Qualification Details | Qualification Board:  Course Completion Date: |
| Enhanced DBS Check | DBS Certificate Number:  Date of Issue: |
| Tutor Preferences | KS 1 KS 2 KS 3 KS 4 Post 16 Adult (Please circle) |

**NB PLEASE SCAN A COPY OF THE SPECIALIST TEACHER QUALIFICATION CERTIFICATE AND DBS CERTIFICATE AND RETURN WITH THE FORM.**

**Assessor’s Register Additional Information**

If you would like to be added to our assessors’ register database, please complete the additional information below. By filling in the details, you are giving your consent for Margaret Pereira, the Assessors’ Officer, to pass on your name and contact number to a parent who is looking for an assessor.

|  |  |
| --- | --- |
| Specialist Teacher Level 7 (or equivalent) Qualification Details | Qualification Board:  Course Completion Date: |
| Enhanced DBS Check | DBS Certificate Number:  Date of Issue: |
| Age Preferences | KS 1 KS 2 KS 3 KS 4 Post 16 Adult (Please circle) |

**NB PLEASE SCAN A COPY OF THE SPECIALIST ASSESSOR QUALIFICATION CERTIFICATE AND DBS CERTIFICATE AND RETURN WITH THE FORM.**

**Data Protection Notice**

Any personal information given to us will be processed in accordance with the UK Data Protection Act 1998 (superseded by the General Data Protection Regulation 25th May 2018). Information will be used:

•To provide members with information about our services

•If members are on our Tutor Register, then to provide details to those who express an interest in employing them

•For administration purposes

•For financial purposes in the context of what is essential for the group to run smoothly