|  |
| --- |
| **Who** |
|  | First & Last Name  | Position/Title | Organisation |
| Click here to enter data | Click here to enter data | Click here to enter data |
| Contact Postal Address | Contact Email Address |
| Click here to enter data | Click here to enter data |
| Landline/Mobile | Skype |
| Click here to enter data | Click here to enter data |

|  |
| --- |
| **Background** |
|  | I am a member of a political party |  Yes [ ]  |  No [ ]  |
| Name of the political party (if applicable) |
| Click here to enter data |
| I am interested in the following policy areas (example: education) |
| Click here to enter data |

|  |
| --- |
| **How** |
|  | I would like to participate in... |
|  |  | the peer-learning programme |  [ ]   |
|  |  | the support network |  [ ]   |
|  | I would like to help with... |
|  |  | fundraising via... |
|  |  | foundations & public bodies |  [ ]   |
|  |  | companies (sponsorship) |  [ ]   |
|  |  | private donors (philanthropy) |  [ ]   |
|  |  | networking... |
|  |  | at the local and national level |  [ ]   |
|  |  | internationally – Europe-wide |  [ ]   |
|  |  |
| I would like to support the initiative with a donation |  [ ]   |