

Membership information

Supporting individuals, families and professionals in Southern Hampshire

Our branch is a self-funded voluntary group supporting autistic children, young people and adults and their families. Full details are available on our website at www.shantsnas.org.uk.

- Monthly evening support group
- · Monthly family youth club
- Children's social groups
- Monthly Lego Club
- Adults' social group
- · Signposting to local teenage youth clubs
- Partners' support group
- Resource library
- · Social events, seminars and training events
- Links to other support services and groups
- Representation on Hampshire Autism Partnership Board
- · Access to a wealth of advice and information

Branch membership

If you would like to become a member of this branch, please read the Branch rules, complete, print out and sign the membership form. This should be returned to the Branch Chair directly or via the activity's leader.

Please note: Membership does not require regular attendance at any of our activities; we can simply keep you in touch with information. There is no membership fee, but we do ask for a small contribution when attending events.

Members are also encouraged to become full members of the National Autistic Society. There are a great many advantages. A leaflet and membership form is available from our website or from the Branch Chair.

Branch rules

In order to ensure the safety and security of all those taking part in our activities, and to comply with our insurance obligations, our equal opportunities, safeguarding and adult/child protection policies (available to view on our website), and the conditions of hire of the facilities we use, we ask that you observe the following:

- The branch is run entirely by volunteers. Any physical, emotional, verbal abuse or rudeness towards volunteers or other branch members will not be tolerated.
- Members are asked to be accommodating of each other's needs and desires. For autistic people, please bear in mind that the needs and desires of someone else with the same condition may be different from theirs.
- Parents/carers must remain responsible for their children and must remain in the same room as their child(ren) at all times.
- Volunteer helpers who are running our activities are not responsible for supervising children.
- All members, whether autistic or not, are asked to treat everyone with respect. No bullying is tolerated (if a person feels they are being bullied, please speak to a committee member), be respectful of other people's personal space and please do not use inappropriate language or conversation, likely to cause embarrassment or offence.
- The branch and its volunteers can take NO responsibility for any loss, damage or injury incurred whilst attending activities.
- The National Autistic Society is a data controller under the Data Protection Act. The personal data you provide
 will be used for administration, statistical and other purposes connected with The National Autistic Society and
 autism. The NAS does not share your details with third parties without your express permission. (See
 www.autism.org.uk/privacypolicy for further details).
- If you no longer wish to continue as a branch member, please contact the Branch Chair. All personal data we hold about you will then be deleted from our records.
- If a branch member fails to comply with the above they may be asked to leave the branch and will no longer be able to attend activities. Equally, if a branch member has concerns over the conduct of a volunteer, these should be raised with the Branch Chair or through NAS Head Office on 020 7923 5770.

South Hampshire Branch
David Carter MBE, Branch Chair
20 Dartington Road, Bishopstoke, EASTLEIGH, SO50 6NR
Email: southhampshire.branch@nas.org.uk
www.shantsnas.org.uk



Branch membership form

Please indicate whether you are.	an autistic addit a parent/carer/family member of an autistic person a professional working with autistic people		
Member's contact details:	Details of next of kin/guardian/	Details of next of kin/guardian/carer (for an autistic adult):	
Title (Mr/Mrs/Ms, etc):	Title (Mr/Mrs/Ms, etc):	Title (Mr/Mrs/Ms, etc):	
First name(s):	First name(s):		
Surname:	Surname:	Surname:	
Address:	Address:	Address:	
Post code:	Post code:		
Phone (daytime):	Phone (daytime):	Phone (daytime):	
Phone (evening):	Phone (evening):	Phone (evening):	
Email address:	Email address:		
Date of birth (for adult autistic member only): .			
Your child(ren)s' name(s) (if applicable):	Plea	ase tick if they are diagnosed as autistic	
Child's name	Date of birth		
Child's name	Date of birth		
Child's name	Date of birthou, we would be grateful if you can include details of the	—	
details/diagnosis, information about any	particular hobbies or interests, or any other relevant infor	nation:	
If you need more room, continue overlea	f. Please add details overleaf of any allergies, special me	dical conditions or medication.	
Are you currently a full member of the lf so, have you nominated us as your local brafee at no extra cost to you. You can nominate	nch? If you are a full paying member, it means we can receive a	*please tick a proportion of your membership	
How did you hear about our branch?			
fundraising activities. We will look after your on http://www.autism.org.uk/privacypolicy . If you if we are keeping in touch with you, doing so Please tick this box if you are happy to recommend.	re Branch, would like to keep you informed about our services, usta as set out in our privacy and data protection policy. To view would like us not to contact you for this purpose, please tick the ey email will help keep our costs down. Between the my/our acceptance of the Branch Rules:	please go to	
Sign	ed Date		
_	completing this form online, please print your name in the signature area		
	AS South Hampshire Branch, c/o 20 Dartington Road, Bishopstoke, nail: southhampshire.branch@nas.org.uk	EASTLEIGH, SO50 6NR	

Data protection

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