

Membership Application Form		
<p>Would you like to become a member of The Queen Elizabeth Hospital King's Lynn NHS Foundation Trust? Members receive emails (maximum two per month) about important Trust matters and developments. Members are invited to attend members' meetings and focus groups, vote in Governor elections and stand for election to sit on the Governors' Council. Your level of engagement is entirely your own choice.</p>		
*Title, First Name and Surname		
*Address		
*Postcode		
*Preferred Email address		
*Work Email address		
Home telephone number		
Mobile telephone number		
*Date of Birth		
<p>About you. You do not have to give us the following information but it helps us to better understand our membership if you do, thank you.</p>		
White (W) British	Asian / Asian British - Indian	
White Irish	Asian / Asian British – Pakistani	
White (any other)	Asian / Asian British – Bangladeshi	
Black/Black British Caribbean	Asian / Asian British – Any other	
Black/Black British African	White & Black Caribbean	
Any other	White & Black African	
	White & Asian	
Prefer not to state	Any other mixed	
Have you been a patient or a visitor to the Trust in the last three years? Please tick as appropriate	Inpatient	
	Outpatient	
	Carer	
	Visitor	
Do you have a disability?	Yes / No (Please circle)	
Is your disability?	Physical	
	Sensory	
	Mental Health	
<p>I am interested in (please select as many options as appropriate)</p>		
A&E/Surgery/Day Surgery	Heart / Stroke / Lungs	
Arthritis / Mobility	Mental Health Services	
Cancer Services	Ophthalmology (Eyes)	
Care of the elderly	Orthopaedics	
Children's Health	Parking/Cleanliness/Catering	
Diabetes	Physiotherapy	
Ear, Nose & Throat	Renal / Urology	
General / Patient Welfare	Women's Health	

The Queen Elizabeth Hospital King's Lynn Membership Foundation Trust Application Form		
As a member of the Trust, I would be interested in (please select as many options as appropriate)		
Receiving regular information	Attending a Focus Group Event	
Attending meetings or events	Becoming a volunteer	
Standing for election to the Governors' Council	Helping with fundraising	
<p>I apply to be a member of The Queen Elizabeth Hospital King's Lynn Foundation Trust and agree to be bound by the rules of the organisation.</p> <p>* I give consent to the processing of my information to become a member of the Trust please place an X or a ✓ to agree <input type="checkbox"/></p>		
<p>We are required to keep a public register of members (names & constituency only). Please place a X in the box if you do not want your name to appear on this register <input type="checkbox"/></p>		
<p>The information you give us will be stored on the membership database in compliance with current UK data protection legislation. Your information will be kept secure, treated confidentially and only used to contact you about the Queen Elizabeth Hospital King's Lynn or in respect of your FT Membership.</p> <p>Please note that, as a member of the Foundation Trust, you will not receive any special benefits in terms of care or treatment.</p>		

NHS Health Service Discounts: Public members are eligible to join the Health Service Discount scheme. Public members gain free access to companies offering discounts unavailable on the high street. Sign up information is provided with your welcome letter and membership card.

Please return the completed form by email to FT.Membership@qehkl.nhs.uk or to:

Foundation Trust Membership Office
The Queen Elizabeth Hospital King's Lynn NHS Foundation Trust
Gayton Road
King's Lynn
PE30 4ET

You could join online by clicking on the hyperlink below:

<https://secure.membra.co.uk/queenelizabethApplicationForm/>

Phone: Foundation Trust Office on 01553 613142 or

Email: FT.Membership@qehkl.nhs.uk

Contact a Governor - Email: FTGovernor@qehkl.nhs.uk

Thank you



* Required information