



Membership Privacy Statement

Data Protection you and your rights

The personal information you provide on this membership form will be used by Shine for the purposes of corresponding with you regarding Shine activities and business.

Your information will be destroyed 12 months after your membership has ceased

Your Consent

- Shine will not collect any personal information about you by any means other than what you choose to provide.
- You can withdraw your consent at any time in writing to the address below or by email to info@shine.ie.
- You have the right to have access to your information and amend or correct it if it is incorrect.
- Your personal information will not be disclosed or shared with a third party without your consent.

Authentic Identity

It is your responsibility to ensure that your personal information is correct and authentic when signing up for any of Shine's services. Submissions and applications that are incorrect or incomplete may not be processed.

Right of Access and information

Shine will supply you with a copy of our Privacy Policy. To obtain a copy or for more information on our data protection policy you should write to: The Data Protection Coordinator, Shine, DOC, Block B, Maynooth Business Campus, Straffan Road, Maynooth, Co Kildare, W23W5X7. Email: info@shine.ie



Membership Form

TYPE OF MEMBERSHIP (please tick)

Full Member / Family Member – Costs €10 per person or €20 for a family of 3. This includes voting rights at our Annual General Meeting (AGM) and counselling, training and events for free or at discounted rates for a 12-month period.*

Student / Volunteer Member – Costs €5 per person*

Associate Member – FREE of charge. There are no voting rights with this membership but you will have access to all of our support groups and open source information. ‡

Please confirm that you would like to receive the following services by ticking the box provided.

- I would like to receive information on Shine core services?
- I would like to receive the electronic Shine newsletter?

CONTACT DETAILS (Please write in BLOCK CAPITALS)

NAME: _____

ADDRESS: _____

EMAIL: _____

TEL: _____

I confirm that I am over 18 years of age.

Signed: _____

Payment Method (please tick as appropriate)

[] cheque

[] postal order

[] directly into our bank account

[] standing order

IBAN: **IE84 BOFI 9005 1919 3454 12** BIC: **BOFIE2D**

Please send your completed membership form to: **Shine, Bock B, Maynooth Business Campus, Co. Kildare, W23 W5X7** after you have lodged the fee in our bank account above. Alternatively, you can register as a member and pay online at www.shine.ie/about-us/membership

*Membership runs from 1st January until 31st December each year regardless of joining date. Membership will be ratified by the Board of Shine and Shine reserves the right to refuse membership without disclosing specific reasons.

‡ Membership runs for a maximum period of 2 years.