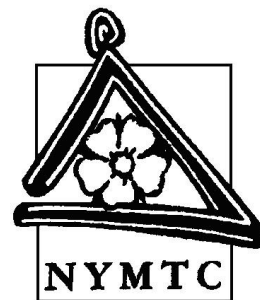


Supporter Contact Preferences Form



Reg Char No 702533

In May 2018, a major update to data protection laws comes into effect.

The new General Data Protection Regulations require UK charities to make sure that supporters have given their permission to be contacted.

By completing and returning this form, you are agreeing to North Yorkshire Music Therapy Centre contacting you by the methods you've selected. We will never contact you by any method you haven't given us permission to use and we will never pass your details to any third party.

We will always limit our direct communication with you to relevant information about or related to North Yorkshire Music Therapy Centre.

1. What is your name

2. How would you like to hear from us? *Please tick the contact methods you would like us to use. We will not contact you by any method you do not tick.*

Email

Text

Post

Social Media

Telephone

3. Please enter your contact details as selected above (*we will only contact you by methods for which you've given us permission*):

Address

.....

.....

..... Post Code

Email address

Phone number

4. If you selected social media, please let us know your social media address(es):

Facebook Twitter

The following is optional information which helps us to understand a bit about you and the things you might be interested in hearing about:

5. What is your age?

- | | | |
|-----------------------------------|-----------------------------------|-----------------------------------|
| <input type="checkbox"/> Under 16 | <input type="checkbox"/> 25 to 40 | <input type="checkbox"/> 61 to 75 |
| <input type="checkbox"/> 16 to 24 | <input type="checkbox"/> 41 to 60 | <input type="checkbox"/> 76+ |

6. How did you first hear about North Yorkshire Music Therapy Centre?

7. Why would you like to hear from NYMTC?

- I have experience of music therapy (directly or indirectly) and want to keep up to date with NYMTC
 - I am interested in a career in music therapy
 - I am interested in volunteering with NYMTC
 - I support the work of NYMTC
 - I am interested in becoming a Friend of NYMTC
 - Other (please specify)
-
-

8. Please use this space for anything else you would like to tell us:

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Thank you for choosing to keep in touch with North Yorkshire Music Therapy Centre.

Please return this form to:

North Yorkshire Music Therapy Centre
121 Town Street
Old Malton
North Yorkshire
YO17 7HD