



**APPLICATION FOR MEMBERSHIP**

I am interested in becoming a member of Ochil View Housing Association. The following details are relevant to my application:

NAME: .....

ADDRESS: .....

.....

.....

TELEPHONE NO: ..... (Home) .....(Work)

EMAIL.....

OCCUPATION: .....

OTHER RELEVANT INFORMATION/ MEMBERSHIP OF OTHER ORGANISATIONS .....

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.....

PLEASE STATE ANY SPECIAL REQUIREMENTS eg Loop system for hard of hearing

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Signed: ..... Date: .....

Please send your completed application and £1.00 to:

**The Secretary, Ochil View Housing Association Ltd., Ochil House, Marshall, Alloa  
FK10 1AB**