

**Form B**

**Ffurflen B**

**North Wales Race Equality Network Affiliated Membership Form**

**Ffurflen Aelodaeth Cyllt Lawn Rhwydwaith Cydraddoldeb Hiliol Gogledd Cymru**

I confirm my support for the objects and principles of the North Wales Race Equality Network and Request to be included as a member of the Network	Rwyf yn cadarnhau fy nghefnogaeth I egwyddorion y Rhwydwaith Cydraddoldeb Hiliol Gogledd Cymru a gofnaf I cael fy nghynnwys fel aelod o'r rhwywaith
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**Please print your name clearly**

**Printiwch eich enw'n glir**

**Name / Enw:** .....

**Organisation / Mudiad :** .....

**Address / Cyfeiriad:** .....

.....

**Telephone / Rhif Ffôn :** .....

**E-mail /E-bost :** .....

**Signed / Llofnod:** .....

**Date / Dyddiad:** .....

The above information will remain confidential to the Network team and will not be supplied to any organisation or individual without signature's permission.

Bydd y wybodaeth uchod yn gyfrinachol I dîm y Rhwydwaith ac ni fydd ar gael I unrhyw gorff nac unigolyn heb ganiatâd y sawl a lofnododd.

## **Data Protection**

We hold the attached information about you on our database. We would be grateful if you will confirm:

- a) that you are happy for us to hold this information about you on the understanding that we will not divulge any part of this information to any one else. (please tick the box to confirm)

- b) that the information is correct and complete, if not can you please amend and complete as applicable.

Many thanks for you support.