

# National Dementia Carers Action Network (NDCAN)

Membership Form

# About this form

If possible, please complete all the sections on this page and the final page for our records. All the information on the other pages is optional. It is very useful to us – but only fill it in if you want to.

Your personal details	
Name:	
Address:	
Email:	
Tel:	Mobile:
Please tell us a bit about your caring role:	
The following information is voluntary, but it will help us build a better picture of our membership if you are willing to provide it. This information is treated confidentially and will not be shared with other members.	
Please tell us a bit about your caring role such as your relationship to the person cared for, when they were diagnosed and their condition/type of dementia and any other information you would like to share	
Are you a member of any other Carer Groups or Networks? Please give details.	

# Local issues

**NDCAN** mainly focuses on campaigning and awareness raising at a national level. There may also be opportunities for you to get involved in campaigning at a local level, for example through working with your local health board or social work department to ensure carers' voices are heard. If you are interested in getting involved in local issues, please indicate below.

# Yes / No

# Could you help us with our campaigns?

**NDCAN** are always working to improve the lives of carers of people with dementia. To help us with this, we are collecting stories of both good and bad practice. Would you like to share your experience? We will contact you to discuss the best way to collect your story.

### Yes / No

# Are you willing to be interviewed about caring for someone with dementia by the media?

Someone from Alzheimer Scotland or **NDCAN** will always ask you first before putting any journalist or supporter in touch with you and someone will be present with you when you are interviewed if you wish

# Yes / No

Please complete this section and return this form to activevoice@alzscot.org

### DATA PROTECTION

The Data Protection Act says that we need your permission to keep this information on file. I agree for Alzheimer Scotland to keep this information on its records.

(We will not use it for any purpose other than matters relating to NDCAN, and will ask your permission first if we wish to share it with anyone else)

SIGNED:	DATE: