



The Welsh Tobacco Control Alliance (WTCA) Membership Form

Name: _____

Organisation: _____

Position: _____

Address: _____

Telephone: _____

Fax: _____

Mobile: _____

Email address _____

Please note: All correspondence is conducted by email.

You will be entitled to vote on behalf of the organisation you represent. It is your responsibility to ensure that your organisation has approved your participation on the WTCA as their representative by completing the declaration below:

I _____ hereby declare that I have the authority to act as the nominated representative of _____ (insert organisation name) on tobacco control issues at the WTCA..

Signed: _____

Date: _____

Declaration of Any Involvement with the Tobacco Industry

Tobacco companies and pro-tobacco organisations are not eligible to be members of the WTCA.

However, some organisations with connections to tobacco companies for the purposes of monitoring the tobacco industry will be eligible for WTCA membership. For example, some tobacco policy organisations own one share in tobacco companies in order to receive the annual report and attend annual general meetings. These organisations would still be eligible for membership.

Please declare whether you or your organisation has any connections to the tobacco industry.

Please complete the following:

I, _____ and/or the organisation(s) that I represent have the following connection(s) with the tobacco industry or its representatives:

_____ (if no connection, state 'none')

If at any time I, or the organisation(s) I represent gain any connections to the tobacco industry or its representatives, I will notify the WTCA Coordinator.

Name (Print): _____

Organisation(s): _____

Signed: _____

Date: _____

Please return this form to;

ASH Wales,
8 Museum Place,
Cardiff,
CF10 3BG

or email to sue@ashwales.co.uk