

**THE ROYAL BRITISH LEGION – FORM MS1a – COUNTY / DISTRICT INFORMATION**

**MS1a FOR THE YEAR COMMENCING \_\_\_\_\_**

All sections of this form must be completed. Section 1 of this form must be completed by the County/ District Secretary after the Annual Meeting of the County / District Conference. Please complete this form **in capitals** and return to the Membership Support Officer.

SECTION 1 – COUNTY / DISTRICT INFORMATION				
<b>COUNTY / DISTRICT:</b>			<b>COUNTY / DISTRICT CODE:</b>	CN
<b>CORRESPONDENCE ADDRESS:</b>				
<b>EMAIL:</b>				
<b>WEBSITE ADDRESS:</b>				
<b>MEETING DETAILS:</b>	Monthly / Bi-monthly / Quarterly Other (please specify):	<b>DAY:</b>	<b>TIME:</b>	<b>VENUE:</b>
SECTION 2 – COUNTY / DISTRICT COMMITTEE OFFICERS AND APPOINTMENTS.				
<b>PRESIDENT</b> <b>Membership Number:</b>	Name:			
	Telephone:			
	Email:			
<b>CHAIR</b> <b>Membership Number:</b>	Name:			
	Telephone:			
	Email:			
<b>VICE-CHAIR</b> <b>Membership Number:</b>	Name:			
	Telephone:			
	Email:			
<b>MEMBERSHIP SUPPORT OFFICER</b> <b>Membership Number:</b>	Name:			
	Telephone:			
	Email:			
<b>SECRETARY</b> <b>Membership Number:</b>	Name:			
	Telephone:			
	Email:			
<b>TREASURER</b> <b>Membership Number:</b>	Name:			
	Telephone:			
	Email:			
<b>POPPY APPEAL CO-ORDINATOR</b> <b>Membership Number:</b>	Name:			
	Telephone:			
	Email:			

**THE ROYAL BRITISH LEGION – FORM MS1a – COUNTY / DISTRICT INFORMATION**

<b>TRAINING OFFICER</b> <b>Membership Number:</b>	Name:
	Telephone:
	Email:
<b>YOUTH OFFICER</b> <b>Membership Number:</b>	Name:
	Telephone:
	Email:
<b>RECRUITING OFFICER</b> <b>Membership Number:</b>	Name:
	Telephone:
	Email:
<b>STANDARD BEARER</b> <b>Membership number</b>	Name:
	Telephone:
	Email:
<b>PARADE MARSHALL</b> <b>Membership Number</b>	Name:
	Telephone:
	Email:
<b>COMMUNITY SUPPORT COORDINATOR</b> <b>Membership Number:</b>	Name:
	Telephone:
	Email:

**SECTION 3 – ANNUAL CONFERENCE REPRESENTATIVE**

<b>NAME:</b>  <b>Membership Number:</b>	Address:
	Telephone:
	Email:

**SECTION 4 - DECLARATION OF ACKNOWLEDGEMENT OF RESPONSIBILITIES**

**This section must be fully completed and signed by all Officers / Committee Members / Appointments.**

Where an Officer/Committee Member/Appointment is elected/appointed during the year the declaration must be read and agreed by them. This action must be minuted at their first meeting.

By signing below I acknowledge my responsibility as County or District Officer/Committee Member and agree to follow in every respect the duties and responsibilities as contained in the Royal Charter and the Membership Handbook and as required by the Board of Trustees, the Membership Council and the Charity Act. I will be vigilant to serve the interests of the Royal British Legion at all times. I will adhere to the data protection rules outlined in GDPR policy.

The contact details you have provided on the form will be used for communications between County/ District Officers and Committee Members, and for communications from RBL staff relevant to your role. These contact

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details may be shared with individuals within RBL, including members, who need to contact you in relation to membership matters. We would like to ensure that your contact details are accurate and up to date and would ask that you inform your Membership Support Officer if there are any changes.

As your role is one on which the reputation of the RBL will rest or you may be managing Legion finances, all roles are required to read the MS1 Self Declaration document and must sign below to say that they confirm that the statements are correct and also that you consent to a DBS check being carried out if the RBL requests it.

### PRESIDENT

By signing below, I confirm that: the statements in the MS1 Self Declaration to be true and, where a statement is not true, I have made a disclosure(s) to the Safeguarding Team via my MSO which has been accepted by the Legion and does not prevent me from carrying out this role; and that I will inform RBL of any changes in my circumstances which would affect the veracity of this declaration..

<b>Name:</b>	<b>Signature:</b>	<b>Date:</b>
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By signing below, I give my consent to TRBL to conduct a Criminal Record check if so required.

<b>Name:</b>	<b>Signature:</b>	<b>Date:</b>
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Are you happy for your telephone number to be published on the County website so members of the public can contact you about membership matters.	<b>Yes</b>		<b>No</b>	
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### CHAIR

By signing below, I confirm that: the statements in the MS1 Self Declaration to be true and, where a statement is not true, I have made a disclosure(s) to the Safeguarding Team via my MSO which has been accepted by the Legion and does not prevent me from carrying out this role; and that I will inform RBL of any changes in my circumstances which would affect the veracity of this declaration.

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### VICE CHAIR

By signing below, I confirm that: the statements in the MS1 Self Declaration to be true and, where a statement is not true, I have made a disclosure(s) to the Safeguarding Team via my MSO which has been accepted by the Legion and does not prevent me from carrying out this role; and that I will inform RBL of any changes in my circumstances which would affect the veracity of this declaration.

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By signing below, I give my consent to TRBL to conduct a Criminal Record check if so required.

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Are you happy for your telephone number to be published on the County website so members of the public can contact you about membership matters.	<b>Yes</b>		<b>No</b>	
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### SECRETARY

By signing below, I confirm that: the statements in the MS1 Self Declaration to be true and, where a statement is not true, I have made a disclosure(s) to the Safeguarding Team via my MSO which has been accepted by the Legion and does not prevent me from carrying out this role; and that I will inform RBL of any changes in my circumstances which would affect the veracity of this declaration.

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<b>Name:</b>	<b>Signature:</b>	<b>Date:</b>			
By signing below, I give my consent to TRBL to conduct a Criminal Record check if so required.					
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Are you happy for your telephone number to be published on the County website so members of the public can contact you about membership matters.		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; text-align:center;"><b>Yes</b></td> <td style="width:33%;"></td> <td style="width:33%; text-align:center;"><b>No</b></td> </tr> </table>	<b>Yes</b>		<b>No</b>
<b>Yes</b>		<b>No</b>			
<b>TREASURER</b>					
By signing below, I confirm that: the statements in the MS1 Self Declaration to be true and, where a statement is not true, I have made a disclosure(s) to the Safeguarding Team via my MSO which has been accepted by the Legion and does not prevent me from carrying out this role; and that I will inform RBL of any changes in my circumstances which would affect the veracity of this declaration.					
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<b>Yes</b>		<b>No</b>			
<b>CCSC</b>					
By signing below, I confirm that: the statements in the MS1 Self Declaration to be true and, where a statement is not true, I have made a disclosure(s) to the Safeguarding Team via my MSO which has been accepted by the Legion and does not prevent me from carrying out this role; and that I will inform RBL of any changes in my circumstances which would affect the veracity of this declaration.					
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<b>Yes</b>		<b>No</b>			
<b>YOUTH OFFICER– Membership Number:</b>					
By signing below, I confirm that: the statements in the MS1 Self Declaration to be true and, where a statement is not true, I have made a disclosure(s) to the Safeguarding Team via my MSO which has been accepted by the Legion and does not prevent me from carrying out this role; and that I will inform RBL of any changes in my circumstances which would affect the veracity of this declaration..					
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<b>Yes</b>		<b>No</b>			
<b>TRAINING OFFICER– Membership Number:</b>					

**THE ROYAL BRITISH LEGION – FORM MS1a – COUNTY / DISTRICT INFORMATION**

By signing below, I confirm that: the statements in the MS1 Self Declaration to be true and, where a statement is not true, I have made a disclosure(s) to the Safeguarding Team via my MSO which has been accepted by the Legion and does not prevent me from carrying out this role; and that I will inform RBL of any changes in my circumstances which would affect the veracity of this declaration.

<b>Name:</b>	<b>Signature:</b>	<b>Date:</b>
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Are you happy for your telephone number to be published on the County website so members of the public can contact you about membership matters.	<b>Yes</b>		<b>No</b>	
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**PARADE MARSHALL– Membership Number:**

By signing below, I confirm that: the statements in the MS1 Self Declaration to be true and, where a statement is not true, I have made a disclosure(s) to the Safeguarding Team via my MSO which has been accepted by the Legion and does not prevent me from carrying out this role; and that I will inform RBL of any changes in my circumstances which would affect the veracity of this declaration.

<b>Name:</b>	<b>Signature:</b>	<b>Date:</b>
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By signing below, I give my consent to TRBL to conduct a Criminal Record check if so required.

<b>Name:</b>	<b>Signature:</b>	<b>Date:</b>
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Are you happy for your telephone number to be published on the County website so members of the public can contact you about membership matters.	<b>Yes</b>		<b>No</b>	
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**STANDARD BEARER– Membership Number:**

By signing below, I confirm that: the statements in the MS1 Self Declaration to be true and, where a statement is not true, I have made a disclosure(s) to the Safeguarding Team via my MSO which has been accepted by the Legion and does not prevent me from carrying out this role; and that I will inform RBL of any changes in my circumstances which would affect the veracity of this declaration.

<b>Name:</b>	<b>Signature:</b>	<b>Date:</b>
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<b>Name:</b>	<b>Signature:</b>	<b>Date:</b>
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Are you happy for your telephone number to be published on the County website so members of the public can contact you about membership matters.	<b>Yes</b>		<b>No</b>	
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**RECRUITING OFFICER– Membership Number:**

By signing below, I confirm that: the statements in the MS1 Self Declaration to be true and, where a statement is not true, I have made a disclosure(s) to the Safeguarding Team via my MSO which has been accepted by the Legion and does not prevent me from carrying out this role; and that I will inform RBL of any changes in my circumstances which would affect the veracity of this declaration.

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<b>Name:</b>	<b>Signature:</b>	<b>Date:</b>
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**THE ROYAL BRITISH LEGION – FORM MS1a – COUNTY / DISTRICT INFORMATION**

Are you happy for your telephone number to be published on the County website so members of the public can contact you about membership matters.			Yes		No	
<b>COMMITTEE MEMBER – Membership Number:</b>						
By signing below, I confirm that: the statements in the MS1 Self Declaration to be true and, where a statement is not true, I have made a disclosure(s) to the Safeguarding Team via my MSO which has been accepted by the Legion and does not prevent me from carrying out this role; and that I will inform RBL of any changes in my circumstances which would affect the veracity of this declaration..						
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<b>Name:</b>		<b>Signature:</b>		<b>Date:</b>		
Are you happy for your telephone number to be published on the County website so members of the public can contact you about membership matters.			Yes		No	
<b>COMMITTEE MEMBER – Membership Number:</b>						
By signing below, I confirm that: the statements in the MS1 Self Declaration to be true and, where a statement is not true, I have made a disclosure(s) to the Safeguarding Team via my MSO which has been accepted by the Legion and does not prevent me from carrying out this role; and that I will inform RBL of any changes in my circumstances which would affect the veracity of this declaration.						
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Are you happy for your telephone number to be published on the County website so members of the public can contact you about membership matters.			Yes		No	
<b>COMMITTEE MEMBER – Membership Number:</b>						
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<b>COMMITTEE MEMBER – Membership Number:</b>						
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**THE ROYAL BRITISH LEGION – FORM MS1a – COUNTY / DISTRICT INFORMATION**

<b>Name:</b>	<b>Signature:</b>	<b>Date:</b>			
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<b>COMMITTEE MEMBER – Membership Number:</b>					
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Are you happy for your telephone number to be published on the County website so members of the public can contact you about membership matters.			<b>Yes</b>		<b>No</b>

**PLEASE CONTINUE ON A SEPARATE SHEET IF REQUIRED.**

**SECTION 5 - STANDARD BEARER AND STANDARD BEARER JUDGE PHYSICAL FITNESS CONFIRMATION**

**This section must be signed by the appointed Standard Bearer and anyone who will act as a Judge at the Standard Bearer competitions. During competitions and remembrance events the Royal British Legion will make every effort to ensure their safety, however, as with any physical activity, there are health risks and a minimum level of physical fitness is required.**

I confirm that:

1. In accordance with Chapter 6 of the Ceremonial Handbook, I have read and understood the responsibilities and risks associated with Standard Bearing and Judging, including but not limited to:
  - Standard bearing/judging is a physical activity and so I must ensure I am both physically fit and strong enough to carry a Standard in all reasonable weather conditions.
  - As a Standard Bearer I will be expected to be able to carry a Standard which is 8ft long and up to 3.5kg in weight (in wet or windy weather conditions Standards may become heavier and difficult to hold upright);
  - Some actions such as Dips may put a strain on the back and shoulders;
  - A Standard Bearer Judge I may be required to remain on my feet for periods of up to 3 hours.
  - Competitions and remembrance events may prove demanding and stressful for some.
2. If I am in receipt of any disability related allowance or benefit, I will inform the appropriate authorities of my intention to undertake the role of Standard Bearer and/or Judge as this may affect my eligibility status.
3. To my knowledge, I have no physical conditions or disability that could potentially put me or others at harm whilst performing my duties as a Standard Bearer/Standard Bearer Judge. If I have, or suspect I have, a health problem which means I may not be able to fulfil all duties required of the role safely, I undertake to inform the appropriate Ceremonial Officer in charge of the competition/remembrance event.

ROLE	NAME (PRINT)	SIGNATURE	DATE
<b>STANDARD BEARER</b>			
<b>STANDARD BEARER JUDGE</b>			