

Associate Membership Application Form

Name of agency/organisation/department
Address
Tel Fax
Email Website
Name of proposed group representative

Tel Email

Does your agency/organisation/department have a remit that includes policy development in relation to interface areas? YES/NO $\,$

In what ways is your agency/organisation/department actively seeking to meet needs within interface communities?

Which interface community/communities are you active within?

What kind of work does your group do within this area?

What work, if any, is your group/organisation involved in which addresses the relationships between interface communities n your area?

Mission Statement

Belfast Interface Project (BIP) is a membership organisation which aims to support the development of creative approaches towards the regeneration of Belfast's interface areas.

Our overall vision is of a Belfast in which interface communities:

- Are free of intercommunity tension, intimidation and violence;
- Have come to terms with the legacies of the past;
- Are socially and economically vibrant, within an attractive physical environment;
- Enjoy freedom of movement in accessing facilities and services
- Have respect for cultural difference and diversity

Do you subscribe to BIP's mission statement? YES/NO

Note: This application form should be signed by two representatives of your organisation, of which one should be a senior manager.

Signature

Signature

Date Date

Please return this form to:

Belfast Interface Project 3rd floor, Cathedral Quarter Managed Workspace, 109-113 Royal Ave, Belfast BT1 1FF t 028 9024 2828 f 028 9031 4829 e <u>info@belfastinterfaceproject.org</u>