MS1 FOR THE YEAR COMMENCING 1st OCTOBER 20.....

All sections of this form must be completed in capitals at or after the Branch Annual General Meeting. Completed forms must be sent to the Membership Support Officer by 31 December (hard copy by post – recorded delivery, or scanned copy by email). One copy must be retained by the Branch for their records.

SECTION 1 - BRANCH INFORMATION								
BRANCH NAME:						BR CODE:	BR	
WEBSITE ADDRESS:								
BRANCH MEETING DET E.g. First Wednesday o month at 19:30	_							
MEETING PLACE:		Postcode:						
Branch email contact								
Does the Branch have a	a Standaı	rd?	Yes				No	
SECTION 2 - BRANCH COMMITTEE OFFICERS AND APPOINT				APPOINTMI	ENTS		•	
		BRANC	CH COMMITTEE OF	FICERS				
Please note that the th Officer) and one perso not hold positions in	on canno	t hold more than	n one of the Branch	Officer	positions. C	Close family m	ember	s must
BRANCH CHAIR	Name:							
Membership	Address:							
Number:	Telepho	one:						
	Email:							
VICE-CHAIR (Optional)	Name:							
(Optional)	Addres	s:						
Membership	Telepho	one:						
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SECRETARY	Name:							
	Addres	s:						
Membership Number:	Talanh	one:						
	Telephone: Email:							
TREASURER								
(Appointed, not	Name:	ς:						
Elected)								
Membership	Telepho	one:						
Number:	Email:							

BRANCH COMMITTEE APPOINTMENTS						
BRANCH PRESIDENT		Name:				
(Optional)		Address:				
Membership Number:						
		Telephone	e:			
		Email:				
MEMBERSHIP SECRETAI	RY	Name:				
(Optional)		Address:				
Membership Number:						
		Telephone	::			
		Email:				
STANDARD BEARER		Name:				
Membership Number:		Address:				
Please note that Standard Bearers must also sign Section 5 of this form		Telephone	::			
		Email:				
POPPY APPEAL ORGANI (optional appointment –	_	Name:				
must be approved by the Poppy Appeal)		Address:				
Membership Number:		Telephone:				
Wiembersinp Wamber.		Email:				
BRANCH COMMUNITY		Name:				
SUPPORT (BCS) REPRESENTATIVE		Address:				
(If Branch delivers the						
Branch Community Support)		Telephone:				
Membership Number:		Email:				
Please confirm below information for Nationa Chair r	the Bi I and I espec	N 3 - BRANG ranch conta MC Election tively but pl	CH ACCOUNTS AND ELECTIONS CONTACT DETAILS ct that the information for the completion of Branch Accounts and the s should be sent to. In the first instance this should be the Treasurer and ease indicate if there is a preferred alternative contact. ank, paper copies will be sent to the nominated contact.			
Branch Accounts	Nam	e:	Role:			
DIAIICII ACCOUNTS	Cont	act email:				
Election Information:	Nam	e:	Role:			
Liection information.	Cont	act email:				

SECTION 4 - DECLARATION OF ACKNOWLEDGEMENT OF RESPONSIBILITIES

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

The minimum number of Committee members is 3, and the maximum – 7.

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 completing the form below, I confirm that I am eligible for election to the Branch Committee and I have been duly elected. I acknowledge my responsibility as Branch 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, and the Membership Council. 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.

The contact details you have provided on the form will be used for communications between Branch Officer/Committee Members, and for communications from RBL staff relevant to your role. These contact details may be shared with individuals within RBL who need to contact you in relation to branch 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. Name: Signature: Date: By signing below, I give my consent to TRBL to conduct a Criminal Record check if so required. Name: Signature: Date: Are you happy for your telephone number to be published on the Branch website so Yes No members of the public can contact you about Branch matters. **BRANCH 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. Name: Signature: Date: By signing below, I give my consent to TRBL to conduct a Criminal Record check if so required. Name: Signature: Date: Are you happy for your telephone number to be published on the Branch website so Yes No members of the public can contact you about Branch matters.

	VICE CHAIR					
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members of the public can contact ye	ou about Branch matters.						
COMMITTEE MEMBER – Membership Number:							
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By signing below, I give my consent to TRBL to conduct a Criminal Record check if so required.							
Name: Signature: Date:							
Are you happy for your telephone number to be published on the Branch website so Yes No					No		
members of the public can contact you about Branch matters.							

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
STANDARD BEARER			
STANDARD BEARER JUDGE			