



ACMA - MEMBERSHIP FORM 2022

Title: Mr/Mrs/Miss/Ms/Other

Name:

Address:

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Postcode:

E-Mail:

Telephone:

Mobile:

Childminder registration number

PLEASE NOTE THAT NO INSURANCE COVER IS INCLUDED IN THIS MEMBERSHIP AND THAT IT IS ILLEGAL TO BE A REGISTERED CHILDMINDER WITHOUT INSURANCE

Who are you insured with?

Date of renewal?

Thank you for completing our form, please return this to the ACMA
theacma@hotmail.co.uk

OR

Membership Secretary
Sharan Fowler
15 Balmoral Road
Andover
Hampshire
SP10 3HY