



ORGANISATIONAL CONSENT FORM

Organisation Name:

Organisation Address:

Main Contact Name:

Main Contact Signature:

Main Contact Position:

Main Contact Email:

Main Contact Phone Number:

This form confirms that the organisation, , has requested help and assistance from the JCC on to support with . We acknowledge that, if applicable, an amount of £ has been agreed upon for payment.

By signing this form, our organisation grants consent for the JCC to act on our behalf. We understand that the JCC does not provide legal advice and is not liable for our organisational needs. We also acknowledge that as a member of the JCC, we may receive periodic updates on relevant information.

Main Contact Name:

Main Contact Signature:

Date:

Trustee Name:

Trustee Signature:

Date:

A UNIFIED VOICE
WORKING FOR THE JEWISH COMMUNITY