Feedback form

Your name

……………………………………………………

Email

……………………………………………………

**Name of your MP**

……………………………………………………

Constituency

……………………………………………………

**Which issue(s) did you raise with your MP:**

* New rules limiting Council freedom
* An end to the arms trade, and all military-industrial collaboration, with Israel
* An end to settlement trade
* Gaza

Other:

……………………………………………

**Is your MP willing to take Parliamentary action?**

1. Sign Early Day Motions?

❑Yes ❑No

1. Write to Ministers on your behalf? ❑Yes ❑No
2. Table parliamentary questions?

❑Yes ❑No

1. Apply for Adjournment/Westminster Hall debates? ❑Yes ❑No

**Is your MP willing to get involved nationally and locally by?**

1. Join Britain-Palestine All Party Group? ❑Yes ❑No ❑ already a member
2. Join their political parties’ group?   
   ❑Yes ❑No ❑Already a member
3. Speak at / hold a local meeting? ❑Yes ❑No
4. Visit the occupied Palestinian territory? ❑Yes ❑No

**For today, will your MP:**

1. Submit a question to International Development ❑Yes ❑No
2. Sign our #actionnotwords sheet (provided) ❑Yes ❑No
3. Get a photograph with you ❑Yes ❑No

**In general, did you MP seem:**

❑very supportive ❑supportive ❑neutral ❑unsupportive

Further comment (please continue overleaf if necessary):

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Please return this to: Please return this form to: November Lobby Feedback, PSC Box BM PSA, London WC1N 3XX Fax: 0207 609 7779 [sara.apps@palestinecampaign.org](mailto:sara.apps@palestinecampaign.org)