**FAIRFORD HISTORY SOCIETY**

**MEMBERSHIP APPLICATION FORM**

Please return the form to Fairford History Society, Community Centre, High St, Fairford, GL7 4AF

Mr/Mrs/Miss/Ms (Ring which applicable) Name(s) (IN BLOCK CAPITALS PLEASE)

……………………………………………………………………………………..................

Address ……………………………………………………………………………………….

……………………………………………………………Post code ………………………..

Telephone number……………………………………………………….

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| E-mail address |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

Fairford History Society takes your contact details in order to keep you advised of events and news.

We do not share this information with anyone or use or use it for any other purpose.

Under the **2018** data protection regulations, we cannot contact you without your express permission.

If your are happy for us to contact you, please tick the relevant boxes below.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| By post |  | By phone |  | By email |  |  |

I/We wish to join/remain a member of Fairford History Society. Please tick a box below for method of payment.

The membership year starts September 1st

For Bank transfers use

Lloyds Bank, sort code 30-92-06 A/C Fairford History Society No 02170130.

Signature…………………………………………………………………. Date……………

Fairford History Society

BANKER’S ORDER

To…………………………………………………………………………………………Bank

……………………………………………………………………………………………Branch

Sort Code …………………………………………Account No.………………………………

……………………………………………………………………………………………Address

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On September 1st …...………. (**please add year**) and yearly thereafter please pay

Lloyds Bank sort code 30-92-06 A/C Fairford History Society No 02170130. the sum of ……….;;;;;

This order to remain in force until cancelled by me in writing.

Name of account holder……………………………………………………………………….

Signature…………………………… Date………………………………… February 2019