



MEMBERSHIP APPLICATION

SOUTH COAST MODELLERS

Full Name: _____

Address: _____

I agree to abide by the rules of the club if elected.

Signed: _____

Phone No: _____

E mail Address: _____

I wish to apply for Membership of the South Coast Modellers as a: -

INDIVIDUAL £20

JOINING FEE PAYMENT FOR £..... Attached

PLEASE MAKE CHEQUES PAYABLE TO " South Coast Modellers "

Payment by bank transfer is preferred if possible To :-

South Coast Modellers , Sort Code 30-96-26 A/c No 76806668

Please state your model subject interest :-

My Current Models:

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I understand that the personal information which I provide on this form will be securely held by the Club and used to provide me with the benefits of club membership I understand that I have the right to view and correct my personal data and if I terminate my membership of the Club I can request that my personal data be removed from the club membership records.

The club may pass on my Name and Telephone Number (NOT address) to another member without prior consultation. (please tick box if you agree)

Proposer: _____ **Seconder:** _____

Date _____