



Sandbach & District Caledonian Society
Membership Application Form

PLEASE PRINT CLEARLY

Name		
Address		
Post Code		
Tel. Nos	Home:	Mobile:
Email Address:		
Preferred Method of contact in case of emergency e.g. cancellation of class. Please circle one option	Home phone	Mobile
Please provide the name and contact phone of a person to be contacted in an emergency e.g. injury during class		

I wish to apply for Annual Membership at £10	
I enclose cash	
Or a cheque payable to Sandbach & District Caledonian Society to the value of	
Alternatively if you wish to pay by BACs the details are as follows Account: Sandbach & District Caledonian Society (Note this is a business account) Sort Code: 20-24-09 Account No: 63637093 Ref: Surname/Mem	

Privacy statement

We will not share your personal information with any person or organisation outside the Society. However from time to time we have requests from members of the Society for contact details of individual members e.g. Other members may wish to contact you in case of illness, to arrange a lift etc. If you do not want your details shared just delete the statement below and sign the form.

I am happy for my contact details to be given to other members of the society if requested.

Signature:	Date:
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