

Leigh-on-Sea Camera Club



MEMBERSHIP APPLICATION AND ANNUAL RENEWAL FORM

PERSONAL DETAILS *(Please print)*

TITLE: SURNAME:

FIRST NAME:

ADDRESS:

.....

POSTCODE:

EMAIL:

HOME TELEPHONE:

MOBILE:

EMERGENCY CONTACT:

NAME:

RELATIONSHIP:

CONTACT NUMBER:

In accordance with **Data Protection** requirements, I understand that the information I have provided will be held on a computer for the purposes of Club Administration. Personal details will NEVER be shared with any organisation. I confirm acceptance of this by ticking this box.

I AM 18 OR OVER

(If under 18 my D.O.B. is ____/____/____, and this form will need to be signed by a parent or guardian after agreeing the Club's Vulnerable Persons Policy.)

Y / N

Do you have any special requirements that need to be accommodated?

If yes, no details are required on the form, a committee member will discuss these with you in private.

Y / N

I agree to abide by the Rules of the Club

Signature: