Swavesey Camera Club  MEMBERSHIP FORM						
Please tick as required:	Single Membership	£68	Pro Rata			
	Concessionary Membership (Pension age)	£55	Pro Rata			
	Junior < 18 or in full time education full year	£20	Pro Rata			
Full Name:						
Address:						
Town:						
County:						
Post Code:						
Landline Tel No:						
Mobile No:						
Email: in capitals						
Sort code 40-16-	only by online banking to "Swave 08, Account no - 01414313, giving tional circumstances only due to bank of	your nam	<u>ne as refere</u>			
New Memb	ers, please enter below where you l	neard abou	it the club:			

SWAVESEY CAMERA CLUB							
General Data Protection Regulations							
I hereby grant Swavesey Camera Club authorisation to process my personal data (overleaf) for the purpose of facilitating club activities. I understand that my data will only be used for the purpose of sending the communications authorised below and for no other purpose without obtaining my specific consent for that purpose.							
Please tick to accept either or both of these communications.							
Email via google group email			Telephone				
Signed							
Date:							