



Bringing memories to the old and lessons to the young

COLNE SMACK PRESERVATION SOCIETY MEMBERSHIP APPLICATION FORM

Title _____ First Name _____ Surname _____ Under 18? Y/N

Address _____

Post Code _____ Phone _____ Email _____

The Society may well contact you, to a limited extent, using the above information.

I would like to receive the journal via EMAIL or POST (please delete as appropriate).

I would like to be contacted about;

Volunteer Work	Y/N
Smack Dock Events	Y/N
Sail & Picnic	Y/N
Crewing opportunities	Y/N
Colne Match	Y/N

Data Protection: Information supplied on this form will be treated in accordance with the CSPS Data Protection Policy. This may be viewed by contacting the Membership Secretary. Your personal information will not be shared with any other organisation.

Declaration:

If my membership application is approved, I agree to abide by the Rules of the Society:

Signed _____ Date __/__/----

Proposed _____ Date __/__/----

Seconded _____ Date __/__/----

Confirmed by CSPS Chair _____ Date __/__/----

Please return this form **complete** to; CSPS Membership Secretary,

members@colnesmack.co.uk

PLEASE ADVISE US OF CHANGES TO ANY DETAILS

STANDING ORDER

To (the name & address of your bank/building society)

.....

Account holder: A/C no: Sort code:

Signature: Date:

Please credit the account of **Colne Smack Preservation Society**, (Barclays Bank PLC)

A/c no. 00100498 Sort code 20-21-73, the sum of **£12.50** immediately and thereafter on **1st November** annually, until this order is cancelled in writing. This supersedes any previous order.

Please reference payments with members' name;