

THE ARTS SOCIETY ASHTEAD

MEMBERSHIP APPLICATION FORM 2024/25

TITLE (MR/MRS/MS	S/ OTHER)		
NAME(S)			(Capital le	tters please
ADDRESS				
		P	POST CODE	
TEL NO:		MOBILE TEL	NO	
e-mail:				
DATE:				
Please tick one only:	Payment by Bank Transfer		Payment by Cheque	
Bank Transfer:	Our bank details (£45 per member)			
	Bank:	Metro Bank Epsom		
	Account Name:	The Arts Society Ashtead 27830226		
	Account No:			
	Sort Code:	23 - 05 - 80		
	Reference:	Your Surname and Initial		

General Data Protection Regulations (GDPR) 2018

I have received and/or had the opportunity of reading, via the Society Noticeboard and/or Website, the Society's Data Protection Policy setting out how the Society deals with my personal information.

GIFT AID

Please see the note about Gift Aid towards the end of the covering letter and, if you are eligible to sign the enclosed form and did not do so last year, please do so and enclose it with this form, which should be returned to the **Membership Secretary** together with your cheque, if applicable.

Once completed, please return this form to Pat Anderson, Membership Secretary, Glenhyde, Paddocks Way, Ashtead KT21 2QY Tel: 01372 275605 enclosing your cheque if appropriate.