

APPLICATION FOR MEMBERSHIP or RENEWAL OF MEMBERSHIP

THE DOVER SOCIETY

Please note: Annual Subscriptions become due on 1st April

RENEWAL ☐ NEW APPLICATION ☐ Please tick as appropriate

Please Print in Block Capitals For Renewal: Membership No.

NAME (Mr/Mrs/Miss/Ms)

ADDRESS

POST CODE TELEPHONE

I agree to abide by the Constitution of The Dover Society.

Signed Dated

(A copy of the Constitution may be read in the Reference Department of the Dover Public Library. It is based on the Model Constitution published by the Civic Trust.)

MEMBERSHIP: £4.00 per person per year.

Please make cheques payable to The Dover Society and forward to the Membership Secretary: Sheila Cope, 53 Park Avenue, Dover CT16 1HD

It would help us in our planning if you would fill-in some or all of this section.

Special Interests.....

If you belong to other relevant organisations would you note them, please.

Can you offer any expert knowledge or experience? Please state.

If you have changed your address since your last subscription payment please tick this box ☐ and please tick the next box if you are willing to assist, occasionally, with the distribution of *The Newsletter* etc. ☐

Very occasionally we may allow our mailing list to be used by other reputable societies and groups. Under the Data Protection Act you are entitled to withhold your permission for this. Please indicate with a X in the box if you DO NOT wish your name and address to be divulged. ☐