

## **Burghfield Camera Club Membership Application**

Title	Surname
Forenames	
Address	
Postcode	
Email	
Telephone/mobile	
I agree to Burghfield Camera Club retaining personal information to enable the club to contact me. I agree to support the Club's constitution and objectives. I accept that the Club will retain this information for up to 6 months after I leave, it will then be deleted from all club records.	
Signed	Date
How did you hear about us?	
<ul><li>Website</li></ul>	
<ul><li>Event or Display (Please specify</li></ul>	,
<ul> <li>Local Magazine (Please specify)</li> </ul>	
<ul><li>Other (Please specify)</li></ul>	



