

APPLICATION FOR SOCIAL MEMBERSHIP OF LOWLANDS CLUB
(18 Years and Over)

Name (block capitals) Mr/Mrs/Ms

Address _____

Post code _____

Telephone No _____

Date of birth _____.

Occupation _____

E-mail: _____

Please write clearly. If you do not receive club e-mails after you are accepted please contact us 0208 582 1801 to ensure we have the correct address)

Data Protection Statement: By signing this form and ticking the box below, you agree that the Club can use your personal data, (name, address, phone number and e-mail) for membership purposes and to send you by post or e-mail or SMS information related to those purposes. In addition, you agree that we may take photos of you at social events and that we may, from time to time, put these on social media such as Facebook to promote the club. The club's Data Protection Policy can be viewed on the website www.lowlandsclub.com

I accept that the club may use my personal data for the purposes above, Please tick

Signature

Date _____
