**CSGGA Membership Form**

**To apply for membership, please complete this form with your payment. This will greatly assist us with our record keeping and we require a signature in respect of the new General Data Protection Regulations.**

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| **1st Member details** |
| **Title** |  | **Initials** |  | **First name or preferred name** |  | **Surname** |  |
| **2nd Member details** |
| **Title** |  | **Initials** |  | **First name or preferred name** |  | **Surname** |  |
| **Address** |  |
| **Post Code** |  | **Tel No.** |  | **Mob No.** |  |
| **Email Address** |  | **Note: You will automatically receive the monthly newsletter via email unless you tick this box** |  |

Please tick as appropriate

***I wish to receive the newsletter by post and enclose my cheque for £20.00 + £5 for each additional member residing at the same address)***

***I wish to receive the newsletter by email and enclose my cheque for £15 + £5 for each additional member residing at the same address)***

***I wish to pay by standing order and have instructed my bank accordingly (note the same membership fees apply - £20.00 for posted newsletter - £15.00 for email + £5 for each additional member residing at the same address)***

***I am willing to help with***

 ***Committee Refreshments Plant Sale Outings Shows***





***Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

**General Data Protection Regulations**: Records for each member are kept by the CSGGA Membership Secretary. All Committee members will also have access to members’ contact details as will members organising outings. Under no circumstances are membership records used for purposes other than those connected to the legitimate activities of the CSGGA. Please advise any member of the committee if you require further details or you do not wish us to hold your records but please note that you will not be able receive a newsletter in this event. **In signing this form, I accept that my data may be kept by CSGGA as described above. Further details can be found on the CSGGA website.**

 Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please send the completed form to*: Briony Wickenden, The* *Membership Secretary, Mulberry House, 54 Milton Fields, Chalfont St Giles, Bucks HP8 4EP* with a cheque for the relevant amount to cover your subscription for the period to 31st October 2019. Cheques to be made payable to: CSGGA**

**Once your subscription is received you will receive a membership card for 2019 together with further information about CSGGA.**