

Bathford Players' Membership Information & Consent Form

Using this form, I would like to (select all that apply):

Join the Players

Update Contact Information

Provide Consent(s)

Section 1: General Member Information & Contact Details

Please enter the following details if joining the Players or you wish to update existing contact information.

Name: _____

Address: _____

Email Address: _____

Telephone: _____

Mobile: _____

Section 2: Consents

I confirm I am happy for Bathford Players to store and use my information, as detailed in the Privacy Policy. Please tick relevant boxes.

I want to receive Bathford Players Newsletter (via email):

Yes

No

I agree for my membership information to be stored and used to facilitate participation in Bathford Players events and performances:

Yes

No

Section 3: Signature

Note: Completion of a membership form is required to be covered by the Players' insurance arrangements.

Signed:

Name (printed):

Date:

Official Use Only:

Collected By:

Subs Collected:

Date:

