

The Chichester & District Philatelic Society

Application for membership

Surname	.....	Title	.....
First Name	.....	Other names	.....
Address	.....	
City	.....	Post Code	.....
Tel no.	.....	mobile	.....
e-mail	.....	

What are your collecting interests? – (by completing this section, you are also agreeing that this information may be shared with members of the club)

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We circulate packets of stamps to members to sell & buy. Do you wish to participate and abide by the rules? (a copy of which is included in your membership booklet)

Yes / No

Are you or have you been a member of any other philatelic society. If yes please provide details

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I wish to become a member of the Chichester & District Philatelic Society and agree to abide by the club rules of copy of which has been supplied to me. I also agree to pay my subscription of £10.00 which is due annually hereafter on the 1st January each year.

Signature **Date**

Propose **Seconder**

The Chichester & District Philatelic Society

Data Protection Policy

The Society collects data from its members to assist with the smooth running of the club in its pursuit of the hobby of philately. i.e.

- Name, address, telephone numbers & email addresses where available
- The collecting interests of its members

This information is held by the Honorary Secretary, who acts as the clubs DPO (Data Protection Officer), and is stored electronically on a personal password protected computer, and in addition the membership data file is password protected.

The information can only be accessed by the Secretary but can be released to any member of the club on request.

Members may request the Secretary at any time to remove the data that the club holds on them.

Members may request the Secretary to amend any details that are held at any time.

Data is erased when a member resigns or ceases to be a member of the club for any other reason.

The details of Officers of the Club are released to the Philatelic Associations that the club is a member of. No other data is released to any outside body without the specific agreement of the member concerned.

Your signature on the reverse of this form indicates your agreement to this policy.