The Society of Mary

FORM OF APPLICATION FOR MEMBERSHIP

To: The Membership Secretary: Mrs K Redington, The Lilacs, Luxford Lane, Crowborough, East Sussex TN6 2PJ. redingtonkathy@hotmail.com

Declaration			
I,		(Block letters, full name please) Title	
discipline and precep	ots; I desire to be admit	Catholic Church and that I c ted a MEMBER of the Society the objects and keep the rules	y of Mary and
I enclose my first sul	oscription herewith (mi	nimum £15, or a Life Subscrip	otion of £150).
Signed			
Address (Block letters ple	ease)		
		Post code _	
Telephone	E-mail		
	re that you read the Da d sign and date the Fo	ata Protection Statement orm of Consent.	
Recommendation b	y a Priest, who should I	be a member of the Society.	
From my PERSONA	L knowledge of		(Block letters please)
I believe that he/she	is suitable to be a mem	ber of the Society of Mary.	
DateN	ame	Signed	
Parish/appointment_			
Address			
Post Code	T ₁	elephone	

Ward Applicant wishes to join
Data Protection Statement
Information given on this form will be used by the Society for membership administration and other purposes connected with the pursuit of the Society's objectives. For those purposes, it may be passed to the Society's agents or professional advisers, but it will not be used for any other purpose or divulged to any other person. For the purposes of the Data Protection Act 1998, the Society's representative is its current Honorary Secretary.
Form of Consent
I hereby give my consent to the entry of personal data supplied on this form into the Society's records, to their being processed by electronic means and to their being passed to the Society's agents and professional advisers. This consent is given on the understanding that the data involved will be used by the Society only for purposes connected with the administration of the Society. I understand that new members are elected pending approval of the Executive Committee and General Council.
SignedDate
By signing this Form, you agree to the Society's use of the information provided by you in the manner set out in the Data Protection Statement above.
FOR OFFICE USE ONLY
Date elected a Member
Ward
Membership Card issued
Membership number

