
The Society of Mary

FORM OF APPLICATION FOR MEMBERSHIP

To: The Membership Secretary: Mrs K Redington, 13 Crewes Avenue, Warlingham, Surrey CR6 9NZ

Declaration

I, _____ (Block letters, full name please) Title _____

declare that I am a member of the Holy Catholic Church and that I conform to her discipline and precepts; I desire to be admitted a MEMBER of the Society of Mary and I PROMISE to fulfil the conditions, promote the objects and keep the rules of the Society.

I enclose my first subscription herewith (minimum £15, or a Life Subscription of £150).

Signed _____

Address (Block letters please) _____

_____ Post code _____

Telephone _____ E-mail _____

**Please ensure that you read the Data Protection Statement
and sign and date the Form of Consent.**

Recommendation by a Priest, who should be a member of the Society.

From my PERSONAL knowledge of _____ (Block letters please)

I believe that he/she is suitable to be a member of the Society of Mary.

Date _____ Name _____ Signed _____

Parish/appointment _____

Address _____

Post Code _____ Telephone _____

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.

Signed _____ Date _____

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 _____

