## The

## Devizes to Westminster ORGANISATION LIMITED MEMBERSHIP APPLICATION - GENERAL

I apply to be a member from Good Friday this year to Maundy Thursday next year.

## PLEASE COMPLETE IN BLOCK CAPITALS. ALL SECTIONS REQUIRED. THIS FORM INVALIDATES ALL PREVIOUSLY CIRCULATED MEMBERSHIP APPLICATION - GENERAL FORM.

APPLICATION - GENERAL FORM.		
	Name: (in full)	Mr/Mrs/Miss/Ms
1	Address for correspondence	
P		ry
	address (in capitals) (address with no	
oblique	e line through any zero to distinguish fro	m letter O )
••••		·····
As a condition	of my membership, I agree that the Orga	anisation may at any time, notify me of any me <mark>etin</mark> g,
	_	bliged by law to send to me, or give me notice of, by notice
_		vink thereon, or may do the same by use of my email
address above,	as the Organisation from time to time de	ecides.
I understand the	at failure to agree to the above condition	will mean that my application will not be
	•	e sole discretion of the Directors and subject to the
approved appli	cant being subsequently entered on the I	Register of Members.
Lam agad 10 ay	n avan and I aubmit this application to th	Commony Socretory via amail with novement of £ 10 to
I am aged 18 or over and I submit this application to the Company Secretary via email with payment of £ 10 to DW Organisation Ltd,		
Signed:	Ap	plicant. Dated :
PLEASE comp	olete, sign and date the form, scan it & en	nail it together with proof of bank transfer (if
applicable) to e	email addresses below:	
	etary - secretary@dwrace.co.uk;	
Finance Team I	Leader finance@dwrace.co.uk	
Bank details:	The Devizes to Westminster Organisati	on LTD
Dank uctans.	Account number: 3905 7046	OILDID
	Sort Code:60-24-06	
For internal use		
Action by:  → Finance	a TI	
→ Co Sec		

Vice Presidents: Robin Meads Tom Armitstead Mrs Janice Begent