

www.northcampmatters.co.uk

Residents Membership Form

Full Contact Name:				
Full Address:				
Post Code:				
Phone:				
Email:				
I have received a copy of NCMCA Privacy Notice		YES	/ NO	
I give NCMCA permis	sion to store my personal detai	ls YES	/ NO	
Please tick box to agree to receive any local information/notifications from NCMCA via				
Email	Text Telephone		Post	
We will accept cheques, cash or bank transfer payable to; "North Camp Matters Community Association" Account details: Lloyds Bank; Sort Code 30-98-97, Account Number 8336186				
Please return the completed form to: The Membership Secretary: NCMCA (NORTH CAMP), PO Box 532, Farnborough, GU14 4HL.				
Signature:		Dat	re://	•

Received with thanks by the Membership Secretary; on DATE on DATE