

**LINCOLNSHIRE VINTAGE VEHICLE SOCIETY LIMITED
MEMBERSHIP APPLICATION FORM**

Personal Details

Title _____

Full Name(s) _____

Postal Address (including postcode)

Telephone Numbers _____

E-mail Address _____

Type of Membership Required (please tick)

Family / Joint	£30.00pa	[<input type="checkbox"/>]
Adult (18 and over)	£25.00pa	[<input type="checkbox"/>]
Junior (over 15 years of age)	£15.00pa	[<input type="checkbox"/>]
Life	£400	[<input type="checkbox"/>]
Senior Life (60+)	£250	[<input type="checkbox"/>]

Declaration

Please enrol me / us as a member(s) of the Lincolnshire Vintage Vehicle Society Limited. I / We enclose a payment (cash or cheque please- cheques should be made payable to **Lincolnshire Vintage Vehicle Society Ltd**) of £ _____ in respect of my / our initial annual subscription. Cash payments should be made at the Museum. Please do not send cash through the post.

Signed: _____ Dated: _____

If under 18, please state age;

When completed, please send this form, together with your payment, to:

The Membership Officer, LVVS Ltd, Whisby Road, North Hykeham, Lincoln LN6 3QT

Explanatory Notes

- 1) The Lincolnshire Vintage Vehicle Society is a Company Limited by Guarantee, Company Number 4616639 and is also a Registered Charity, Number 1098653.
- 2) Membership runs for a 12 month period from the date of application and at renewal members are offered the option to pay future years subscriptions by bankers order.
- 3) Under the Society's constitution, all requests for membership have to be approved by the Society's Board of Directors, who meets monthly. There may, therefore, be a short delay before you receive confirmation of acceptance and a welcome letter.
- 4) Under The Data Protection Acts membership records are held on a computer database. We confirm that all data held about you will be kept private and confidential in a secure environment. We will not disclose any data about you or allow or suffer any data about you to be disclosed to any person or body without your written permission or otherwise as required by law. If you do not wish us to retain data about you, please advise the Membership Officer at LVVS Ltd, Whisby Road, North Hykeham, Lincoln LN6 3QT.

We do ask for your permission to disclose your name and address to our printers for the purpose of circulating the Society's printed material. We will only use printers who observe Data Protection principles and who are registered with the information commissioner. By signing this application form you will be deemed to grant permission to disclose your name and address to our printers.

