Sway Bowmen

Renewal of Membership

	Name			
	Address			
	Post code			
	Telephone	mobile:-		
	e-mail			
	Date of Birth			
	GNAS number			
	I have read, understood and agree to be bound by the rules in the Club Handbook.			
	In accordance with the General Data Protection Regulation I give permission for the above personal information to be held by Sway Bowmen Archery Club both manually and electronically. (Refer to the Club GDPR Policy on our website) I understand that it will only be used for Club membership reasons and to keep in touch with me and will be held securely and only accessed by authorised Club Officers			
	I consent to this information being he	ld Yes No		
Signed(Parents must sign for children under 16)				
	Date			
	If consent is not given we will be unab	le to contact you		