



**THE SCURRY DRIVING ASSOCIATION**

Email : secretary@scurrydrivers.co.uk

**MEMBERSHIP APPLICATION FORM 2020**

Membership is from the 1st January until the 31st December of the same year.

TITLE	NAME	ADDRESS
	POST CODE	
MOBILE		
EMAIL		
TITLE	NAME	ADDRESS
	POST CODE	
MOBILE		
TITLE	NAME	ADDRESS
	POST CODE	
MOBILE		
TITLE	NAME	ADDRESS
	POST CODE	
MOBILE		

MEMBERSHIP CATEGORY	FEE	AMOUNT
<b>FULL MEMBERSHIP</b> * Enclose a copy of adequate third party public liability insurance with this form. Policies accepted are :- BHS Gold & BHDTA Full or Associate or equivalent cover. * (Full voting rights)	£25	
<b>FULL NON DRIVING MEMBER RENEWAL</b> (Full Voting rights)	£25	
<b>JUNIOR MEMBER</b> Under 18yrs of age. (No voting rights)	£25	
<b>SUPPORTER MEMBER</b> (No voting rights)	£10	
<b>COMPANY MEMBER</b> (One vote)	£100	
<b>TOTAL AMOUNT DUE</b>		
Please make cheques payable to The Scurry Driving Association. <b>SEND TO :- Scurry Driving Association, Flat 8 Moss Court, 51 Portsmouth Road,            Liphook, Hampshire, GU30 7GG</b>  Payment via BACS to Scurry Driving Association – Sort Code 30 – 95 – 28 Account 04370955  <b>Do remember to add a suitable reference for the benefit of the Treasurer.</b>		



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General Data Protection Regulations

The Scurry Driving Association records personal data for the purpose of administering the sport and may be by association Agricultural Shows to supply such information in order that they can supply show documents.

Are you in agreement that your recorded data is shared for these purposes.

Signature

Banking Details

The Association has extended the way in which it carries out its business and is using Internet Banking. It is intended that all show administered by the SDA will pay prize money directly into members bank accounts. To do this it requires details of the account to which payment is made, if you agree to this method of payment will you please enter the details opposite

Account Name

Bank

Sort Code

Account No.

I agree to abide by the rules and by-laws of The Scurry Driving Association (as amended from time to time)

SIGNATURE : \_\_\_\_\_ DATE :

Signature of Parent or Guardian if under 18yrs : \_\_\_\_\_

Date of Birth if joining as a Junior Member : \_\_\_\_/ \_\_\_\_/ \_\_\_\_