



# Vectis Party

## Application for Membership

V Nov 20

Please enter your details in BLOCK CAPITALS. \* Denotes required field.

Title*	Forename(s)*	Surname(s)*
Address*		
Town/City*	County*	Postcode*
Phone*		Date of Birth
Email*		

<b>Get involved</b> I would like to assist the Vectis Party by: (tick as appropriate)	<input type="checkbox"/> Delivering leaflets	<input type="checkbox"/> Assisting the Committee
	<input type="checkbox"/> Working from home	<input type="checkbox"/> Canvassing
	<input type="checkbox"/> Displaying a sign	<input type="checkbox"/> Standing at elections

<input type="checkbox"/> Standard Subscription (annual) £15
<input type="checkbox"/> Concessionary Subscription (annual) £10 Unemployed / Universal Credit / Retired / Registered Disabled / Students / Armed Forces / Blue Light (proof may be required)
<input type="checkbox"/> Voluntary donation added to annual subscription £_____
<b>Total amount</b> £_____

<input type="checkbox"/> I have read and agree to abide by the terms and conditions of Vectis Party membership ( <a href="http://www.vectisparty.org/dataprotection">www.vectisparty.org/dataprotection</a> ).
<input type="checkbox"/> I agree to be contacted by the Vectis Party in line with the terms and conditions.
Signature_____ Date_____

<b>I enclose a Cash / Cheque payment or Direct Debit mandate (delete as appropriate).</b> Please make cheques payable to "Vectis Party". Please do not send cash via post as we cannot guarantee that we will receive it. For Direct Debit please fill in separate mandate form. If you do not have a mandate form please tick here <input type="checkbox"/> and we will send you one. Your Membership application will not be processed until we have received payment.
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Please return to: The Treasurer, Vectis Party, Castle Keep, New Road, Wootton Bridge, Isle of Wight, PO33 4JL.