Southborough & High Brooms Amateur Archaeology Society

 **MEMBERSHIP FORM**

 **1 April 2016 – 31 March 2017**

If you would like further information about what the society has set out to achieve please contact: **info@southborougharchaeology.org**

Please fill in the application form and return it to the email address above.

|  |  |
| --- | --- |
| Name |  |
| Age | under 18 ☐ 18 – 29 ☐30 – 45 ☐ 46-65☐ 65+ ☐  |
| Gender (please tick) | Male ☐ Female ☐ |
| Address for correspondence |  |
| Email (BLOCK CAPITALS) |  |
| Phone |  |
| Have you been part of an archaeological excavation before? Please give details. |  |
| Are there any limitations (health or other) of which SHAAS needs to be aware? |  |
| How did you hear about SHAAS? |  |
| Membership fee Individual £5 ☐Family £10 ☐*Please note that children need to have a parent/guardian with them at all times* | Cheque enclosed for £ ……………BACS for £………………. Transferred date ……………………..SHAAS a/c 65772852 Sort code 08-92-99Family membership - No of Adults …… No of Children …… |

I agree for my personal/family details to be used for SHAAS admin. I permit/do not permit any photographs of myself/family on SHAAS events to be used for SHAAS publicity purposes.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_\_