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| SECTION ONE: Member Contact Details  |
| Person 1 |
| Title  | First Name(s) | Surname |
|  |  |  |
| Email Address |  |
| Contact Number |  |
| Person 2 |
| Title | First Name(s) | Surname |
|  |  |  |
| Email Address |  |
| Contact Number |  |
| Home Address |  |
| SECTION TWO: Declarations and Confirmation |
| By ticking below and signing,  |
|  | I/we agree to become a member(s) of the Baldock Town Twinning Association and confirm that the information I/we have provided is accurate. |
|  | I/we have made payment for one year’s subscription fee for the Association (please see below#) |
|  | I/we confirm that I/we have understood and accept the Association’s Privacy Policy\*  |
| I/We consent to be contacted in the following ways |
|  | by post |  | by email |  | by phone |
| Person 1Signature |  | Date |  |
| Person 2Signature |  | Date |  |
| Please return your completed form via email to **baldocktowntwinning@gmail.com** or to one of the contacts listed here: |
| Honorary Secretary – B.T.T.AMs Abigail Hucker27 Weston WayBaldockSG7 6EZTel: 07729525648 | Honorary Chairperson-B.T.T.AMrs Vivienne Reed10 Park StreetBaldockSG7 6DYTel: 07815 308124 |