**Gorebridge Community Development Trust (GCDT) Membership Form**

Please complete in block capitals:

|  |  |
| --- | --- |
| Name |  |
| Address 1 |  |
| Address 2 |  |
| Postcode |  |
| Date of Birth |  |
| Telephone: |  |
| Mobile No: |  |
| Email Address: |  |
| Print Name: |  |
| Signature |  |
| Date |  |
| Email List: | (please circle one) YES NO |

Data Protection: please complete our data protection form. If you would like to read a copy of our privacy policy, please go to: http://gorebridge.org.uk/privacy-and-cookies-policy/

|  |  |
| --- | --- |
| For Office Use Only |  |
| Approved by Board  |  |
| Correspondence Sent |  |

**Please return this Membership Form to:**

Gorebridge Community Development Trust,

58 Main Street, Gorebridge, EH23 4BY

OR office@gorebridge.org.uk

**Gorebridge Community Development Trust**

**Consent Form to Collect & Use your Personal Information**

Under the General Data Protection Regulation (‘GDPR’) there are occasions when **Gorebridge Community Development Trust** must obtain your explicit consent to use your information, known as ‘Personal Data’. Personal Data includes, but is not limited to your name, address, telephone number and email address.

**Gorebridge Community Development Trust** would like to hold and use your information for the purposes set out below.

Please tick all relevant boxes to indicate your consent. You may consent to all of the purposes, any number of the purposes or none of the purposes. If you do not consent to **Gorebridge Community Development Trust** using your information for the purposes listed below then we will not contact you.

To hold my details for membership purposes:

**🞎** Name **🞎** Address **🞎** Email Address **🞎** Phone Number **🞎** Mobile Number

To keep me informed of news, services, activities and events:

**🞎** Name **🞎** Address **🞎** Email Address **🞎** Phone Number **🞎** Mobile Number

To contact me with regards to specific fund-raising events

**🞎** Name **🞎** Address **🞎** Email Address **🞎** Phone Number **🞎** Mobile Number

**Please complete your details below:**

Name:

Address:

Email Address:

Phone Number:

Mobile Number:

Signature:

Date:

Membership No (if known):