

## **RENEWAL OF MEMBERSHIP**

Mr/Mrs/Ms/Miss*: Name:  Address:		
Teleph	none: Mobile:	
eMail:		
I, the ur	ndersigned wish to renew my Membership of Rosliston Astronon	ny Group for the current year.
As a Me	ember, I agree:	
1. 🗆	to be governed by Rosliston Astronomy Group CIO's Constitut	ion.
2. 🗆	to pay in full the Membership subscription within eight weeks of	of its due date (1st. Jan) each year.
I unders	stand:	
	that I may withdraw from Membership at any time by writing to do so.	o the Committee, indicating my wish
	that, by my withdrawal from Membership I will relinquish my to paid-up Members.	entitlement to those benefits available
	Member's Privacy State	<u>ment</u>
	I have read the Privacy Policy for Rosliston Astronomy Group my personal information is managed, and where it is held.	(RAG), that informs me how and why
	I understand that RAG will review my personal details annually immediately with any changes that may occur within that time.	, and I agree to update the Society
	[If relevant] I request that my email address be included in the I that I may receive information electronically. I understand that the list at any time, but I would continue to receive important Malternative source.	I may request this be removed from
	I agree for my name to be included in relevant items posted on RAG website, and on Twitter.	the Blog, on the
	[If relevant] I agree for my photographs to be included in relevant RAG website, and on Twitter.	ant items posted on the Blog, on the
	I understand that I may request that my personal data be remove Group's Membership data base at any time, and that by doing s Society.	•
Signed	d:	Date:

Form B 03/2018 \* Delete as necessary