



MEMBERSHIP APPLICATION

Please complete in **BLOCK CAPITALS**

Name.....

Address.....

.....

Postcode.....Telephone.....

E-mail
Address.....

Confirm E-
mail.....

Cheques made payable to **Saffron Walden Art Society**. Please do NOT staple.

FULL TIME STUDENTS **£5.00**

STANDARD **£17.00**

COUPLES (living at same address) **£32.00**

Send form & cheque to:

RUTH OINN 36 SAXON WAY SAFFRON WALDEN ESSEX CB114EG

Telephone: **01799 523816** E-mail: **ruthoinn@gmail.com**

NB

You may be aware that the society holds your contact details on a computer database.

For insurance purposes only, names are given to SAA (our insurer). Contact details have to be shared amongst members of the committee, at various times, for mailing and at other times when necessary. Details of the database are not shared or passed onto third parties.

In addition, we assume that you are happy for your work to be included in the website, and face book unless you notify us otherwise.