



MEMBERSHIP APPLICATION FORM

Name:	
Address:	
Email:	
Phone:	
Membership:	Individual <input type="checkbox"/>
	Group/Organisation <input type="checkbox"/>
	Organisation Name
<p>Membership is open to:</p> <ul style="list-style-type: none"> any individual who is a trustee and/or volunteer of Abundant Borders with an interest in the progress of the charity and charitable its purpose any individual with an interest in the progress of the charity and its purpose any individual who has been nominated for membership on behalf of an organisation with an interest in supporting the charitable purpose of Abundant Borders 	
<p>Membership is not open to:</p> <ul style="list-style-type: none"> employees of the company. A person who becomes an employee after admission to membership shall automatically cease to be a member 	
<p>In line with GDPR regulations:</p> <ul style="list-style-type: none"> Abundant Borders will only use details supplied on this form to contact you about our AGM and any other relevant events. Your details will not be passed to other organisations If you withdraw your membership, we will not keep/store your personal details You can contact us at any time to withdraw your membership 	
Signature:	
Date:	
Approved by:	
Signature:	
Date:	