



visit us on : [wellingboroughsingers.org](http://wellingboroughsingers.org)



# MEMBERSHIP FORM 2019 -20 Please complete in BLOCK CAPS

Title: .....Forename: ..... Surname: .....

Preferred Voice Part : S1 / S2 / A1 / A2 / T1 / T2 / B1 / B2

Postal Address : .....

..... Postcode : .....

Home Telephone : ..... Mobile : .....

Email address : .....

**If** you would like to provide the **name and contact telephone number** of someone in case of emergency, please gain that person's permission for us to hold those details, and note them below:

.....

### Please amend the following statements by deleting as applicable:

- (1) I **give / do not give** permission for my name to be listed in concert programmes.
- (2) I **give / do not give** permission for my contact details which include my name, address, phone number and email address to be made available to committee members and my voice part secretary to enable efficient running of the choir and keeping me informed of the choir's activities and events.

### Subscription, which will include the cost or hire of all music copies.

Full Season £85  One term only £50  Age under 30 – free membership

Choral Workshop Saturday 7th September 10.30am – 4pm £12

If you choose one term only please indicate if this is the Autumn  or Spring  term.

### Payment method

**Cheques:** made payable to Wellingborough Singers.....

**Bank Transfer** please indicate your reference.....

Sort code 55 70 37 Account number 96818867

**Send to:** Dr D Lawrence, 8 Whytewell Road, Wellingborough, Northamptonshire, NN8 5BE

email [davidlawrence846@btinternet.com](mailto:davidlawrence846@btinternet.com) by the first rehearsal in September 2019.

Signature : ..... Date : ...../...../.....

**This information will be held on the choir's confidential membership database. Permission to use your data can be cancelled at any time by writing to or emailing the secretary.**