

THE SURVEY SHIPS ASSOCIATION
MEMBERSHIP APPLICATION FORM

SURNAME

FORENAMES *photo.*

HOME ADDRESS

.....

.....

POST CODE TEL. CODE NUMBER

FAX. CODE NUMBER

MOBILE PHONE NUMBER

E-MAIL D.O.B

SPOUSE / PARTNERS NAME(S)

I wish to apply for **Full/Associate/Honorary* membership of **The Survey Ships Association**. If accepted I agree to be bound by The Constitution of the Association.

I **consent / *do not consent* to my Address (**NOT** Telephone No.) being included on a list to be circulated to all Members. (*Delete as necessary).

Name for Name Tally:

Wife/Partner's Name for Brooch: (*including surname*)

Please record your service in Survey Ships/Units/NPs on the reverse:

£10.00 Registration Fee due on Application

Annual Subscription £10.00 fixed until the year 2009

Preferred Method of payment by Standing Order - Combined Mandate Enclosed

REGISTRATION

Signature **Date**

* I wish to pay by Standing Order and have sent the Mandate to my Bank.

* I do not wish to pay by Standing Order but will pay Annually, by 1st January without reminder and I enclose a cheque to the value of £10.00 for my Registration.

* Delete as necessary.

Please make cheques payable to: The Survey Ships Association

Constitution Art. 302 Annual Subscriptions are due on 1st January

Members not paid by 28th February will be deemed to have lapsed their membership.

Return form to: Mr Erskine (SSA) 8 Grosvenor Court, 74 East Lodge Park, Farlington,
Portsmouth, Hants. PO6 1BY

PLEASE ENCLOSE A PASSPORT SIZE PHOTOGRAPH OF YOURSELF

