**GROUP MEMBERSHIP FORM**Groups up to 50 members £5\* per person – 51+ members £3.50\* per person (\*Prices only apply to groups with a main contact who will deal with the admin)
Why not pay via **BACS**. Once you have made your payment please e-mail us to confirm and include a reference if you have one. You can either post or e-mail us your membership form or renewal list.
Account number 91683225 Sort code 40-09-13
Please can the representative provide us with an e-mail address if you have one as they will be responsible for forwarding the receipts on to allotment holders. If you require Employer’s Liability insurance @ £15 per person in charge, please tick. **Please mark clearly on the list below those who requires this cover.**

SHEET NO. \_\_\_\_\_ NAME OF GROUP \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Group contact details (i.e. Secretary or Representative, you must provide us with a contact phone number)

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Name (**with title**) Full Address with Postcode E-mail OFFICE USE

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Web2018

Please tell us where you heard about SWCAA………………………………………………………
Ref 2018

**REGISTER YOUR ALLOTMENT SITE AND ASSOCIATION ON THE SWCAA’S SITE REGISTER**

Please add your group/association or allotment site to our National site register. This provides people with a wealth of information on the Allotments and Associations in their area. Please fill in this form and post it back to us. Please be sure to keep your contact details up to date and let us know of any changes as soon as you can.

Name of Site……………………………………………………………………………..

Name of Association (if you have one)………………………………………………..

Address/Location………………………………………………………………………..

Number of plots…………………………………………………………………………

Waiting List Y/N…………………………….

Number on list (if known)……………….

Who runs/owns your site (e.g. Council or Association or run jointly)

……………………………………………………………………………………………

Association Contact Details (include e-mail address if they have one)

……………………………………………………………………………………………

Any other information:

Please give your permission for the information to be used on our website.

Y/N………………………………………

Signed……………………………………………………………………………………

Date……………………………………

Thank you.

**SWCAA Data Protection consent**Dear Association Representative

This form refers to the up and coming change in the Data Protection laws. For us to protect your data in accordance with these laws we need to provide when asked, evidence that we have followed all proper procedures in how we use and store your data. We need your consent to use the data you have provided us to contact you regarding SWCAA matters, send you newsletters or any other allotment related information that we feel is relevant. We also would like you to be assured that we do not ever pass your information on to anyone else. The data we are referring to is your own personal contact information plus that of the members of your association. We would advise that as an association you put some procedure in place of your own to comply with how the change in the law might affect your group and how you store their data. As part of this we would ask that you make all your plot holders aware that you do share their information with SWCAA.

The information you provide to us below will be kept on your file for as long as you are members of SWCAA. If and when your plot holders give up their allotment or when your association wishes to no longer be a member of SWCAA, please let know as soon as possible so we can take the proper steps to remove both the paper and data information from our records. For further in depth information on our data protection policy please see the policies page in the about us section on our website [www.swcaa.co.uk/about](http://www.swcaa.co.uk/about)

Please complete the following details below which gives us your consent for SWCAA to use and store your personnel details.

Name of group or association:………………………………………………………………………………………….

Name of representative: Mr, Mrs, Ms, Miss……………………………………………………………………….

Address:…………………………………………………………………………………………………………………………

…………………………………………………………………Post code…………………………………………………….

Phone/mobile:………………………………….Email:……………………………………………………………………

Membership Number of representative if known: ………………..

I give SWCAA my consent for them to store and use the personal details of our association and its members (please tick)

**Important:** Please complete and return this form to us a soon as possible either via e-mail to swcaa@btconnect.com or post to our registered office at: SWCAA – CIC, 22 Miller Crescent, Barnstaple, North Devon, EX32 7DZ

If you have any queries regarding this letter or require any further information regarding the data protection law please do not hesitate to contact us on 01271 327087.