

# KENT COUNTY ASSOCIATION OF CHANGE RINGERS

## MEMBERSHIP APPLICATION FORM



If you (or the parent/guardian) have email/internet access, you must join online here:

<https://membermojo.co.uk/kcacr>. This form should only be used for those without email/internet access.

### Personal Details

Please complete all parts of this section. Please **PRINT CLEARLY!**

Title	
First name	
Surname	
Year of birth <i>(for insurance purposes)</i>	
Address	
Postcode	
Phone No.	
Offline application	<input type="checkbox"/> I confirm I do not have email and cannot apply online

### New Member Validating Officer

This section **must** be completed for **all** new applicants. New Members must have their competency validated by a serving District or Association Officer, and they must be elected at a District or Association meeting.

Validating Officer Full Name & Role	
Validating Officer E-mail Address	
Validating Officer Signature	
Date of Election	

### Membership Category

Please select the membership type you are applying for:

- Adult (resident and/or regularly ringing in Kent)
- 18 & Under
- 80 & Over
- Associate
- Non-Resident Life

### Home Tower

This section **must** be completed for **all** new applicants.

Home Tower & District	
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## Parent or Guardian Details

This section **must** be completed for all new applicants who are under 18 years old.  
By signing this form, the parent/guardian gives consent for their child to join KCACR.

Name of Parent or Guardian	
Phone number	
Signature	
Date (dd/mm/yyyy)	

## Declaration and Signature

This section **must** be completed for **all** new applicants.

I apply for membership (or renewal of membership) of the Kent County Association of Change Ringers. I confirm I have read the Rules of the Association and am eligible for the membership option I have applied for. I confirm that I can, without assistance, ring rounds and lower a bell, in accordance with rule 4(i) of the Rules of the Association. My competency has been assessed and confirmed by an elected District or Association Officer who has also signed this form.

I (and my parent/guardian if under 18 years of age) note that the details provided below may be held on a computer database and/or in a manual filing system and used for Association communication purposes. This data will be made available to officers of the Association for subscription records and handbook production. Details of tower or District officers may also be made available to other ringers or ringing associations, but no commercial use will be made of the information provided. By completing and signing this form, I (and my parent/guardian if under 18 years of age) agree to the data usage conditions described above.

For applicants under 18 years of age - Parent/Guardians by signing this form you also give permission for these contact details to be shared with the Association Youth Officer and District Youth Coordinator, who will advise you of activities of the Kent Young Ringers.

I would prefer **not** to be contacted by the Association (please tick if applicable)

Membership is subject to election at a District or Association meeting, completion of this form and payment of your subscription. The Association reserves the right to refuse an application or request further information in support of it. The full annual subscription fee (or half if applying between 1<sup>st</sup> July and 31<sup>st</sup> December) is due at the time of application.

Signed:		Date: (dd/mm/yyyy):	
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## KENT COUNTY ASSOCIATION OF CHANGE RINGERS

### Payment

Payment is accepted by cheque or bank transfer.

The person making the payment by cheque or bank transfer **MUST** send a list of the individual names paid so that we can assign the payment to the correct individuals.

I will pay by bank transfer to “Kent County Association of Change Ringers Subscriptions”, Sort code: 52-41-42, Account: 66790875. Important - the payment reference **must** include "SUBS" and the TOWER name (e.g., “SUBS Anytown”) or the individual MEMBER name (e.g., “SUBS Leslie Smith”)

I will pay by cheque payable to “Kent County Association of Change Ringers Subscriptions”. You **must** write the individual member’s name and the tower name on the back of the cheque.

### Post the completed form to the Association!

Post the completed form, cheque (if applicable) and a covering note to:

Mr. D G Davis, 3 Tamarind Close, Hempstead, Gillingham, Kent ME7 3ST.