	For Office Use only
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I\	MEMBERSHIP RENEWAL FORM		NAME:
NAME/BUSINESS N	AME		
SOCIETY NAME:			MEMBER SIN
POSITION IN SOCIE	ETY/BUSINESS:		
ADDRESS:			
POST CODE			
TELEPHONE NUME	BER		
ALTERNATIVE/PREF	ERRED CONTACT DETAILS (please include name, address, email ar	d telephone number)	
	Please circle below the amo	unt enclosed:	
	RATES FOR THE COMING YEAR	£	
SOLO	Individual membership	15.00	
DUET	Two people living at same address	20.00	
CHORUS	Society/Group membership (see reverse for bandings)		
	Band 1:)	50.00	
	Band 2:)	75.00	
	Band 3:)	100.00	
	Band 4:)	125.00	
	N.B. 3 (three) reviews are included in the annual membership. Any additional reviews are charged at £15 per review.		
CREW	Associations, traders and businesses	100.00	
	e for the appropriate amount payable to ACT EVENTS ank Ltd. Account - ACT Events Sort Code 20-55-41 Accour PAYMENT CONFIRMATION REQUIRED	nt No 90367591	
SIGNED	DATE		

All information supplied by you will be treated in the strictest confidence and will conform to the

Association GDPR 2018 Data Protection Policy document May 2018.

For additional notes see reverse of the form

GUIDANCE NOTES ON COMPLETING THE FORM

The following notes will help you to decide which Subscription rate is applicable to you:

SOLO	Individual membership
DUET	Two people living at the same address
BANDS	Society/Group
	Band 1: Up to £5,000.00 annual turnover.
	Band 2: Up to £10,000.00 annual turnover
	Band 3: Up to £20,000.00 annual turnover
	Band 4: Over £20,000.00 annual turnover
	N.B. 3 (three) reviews are included in the annual membership. Any additional reviews are charged at £15 per review.
CREW	Any business, associations, traders applying in business/ association name.

Please return the completed for with your payment to:

Lynn Smith, 3 Queens Road, Urmston, Manchester, M41 9HE
Thank you.