



Guisborough Model Flying Club

MEMBERSHIP APPLICATION FORM

First Name (s): _____

Surname: _____

Address: _____

Post Code: _____

Telephone: _____

Mobile: _____

email: _____

Date of birth: _____

Are you, or have you ever been a member of another Model Flying Club(s)? If so please list the club(s).

Have you ever been refused membership of another Model Flying Club? Yes / No

Are you, or have you ever been a member of the BMFA?, if so please provide details (if known)

BMFA No.: _____

Membership type : Full/Country Senior/Junior (del As req)

Subscriptions : Senior £____ Junior £____

1. I agree to be bound by the Club's Constitution and Rules.
2. I understand that there will be a 12 month probationary period before becoming a full member of Guisborough Model Flying Club
3. By providing telephone, mobile and email contact details I consent to the club contacting me by these methods.
4. GMFC holds personal data in accordance with the GDPR of 2018 as set out in the Club's Privacy Notice and shares this with BMFA.
5. The Club's Rules, Constitution and Privacy Notice will be provided or found at <https://guisboroughmfc.co.uk>.
6. For Country Membership (Club subscriptions only) you will need to produce a current BMFA membership card.

Date: _____ Signature: _____