

**MEMBERSHIP FORM**

Name	
Address	
County	
Telephone number	
Email	
I confirm I am of legal voting age:	<input type="checkbox"/>
I consent to my data being stored by Three Villages Flood Group (TVFG) in line with the group's Data Protection Policy:	<input type="checkbox"/>
I consent to my contact details (name, address, phone number and email address) being shared with other members of Three Villages Flood Group for the purpose of carrying out TVFG's aims and objectives:	<input type="checkbox"/>
Date and Signature	

Please return the form to the Secretary.

You can withdraw your consent for us to use your information, or ask us to amend or delete your details, by emailing the Secretary.