## APPLICATION FORM: RETIRED PRISON GOVERNORS ASSOCIATION

	· · · · · · · · · · · · · · · · · · ·	Name:					
1		Address:					
	- American						
Р	ERENNIS						
		Email.					
and contact confirm tha I also agree	details of members are stored at I am aware that I can review	electronically for the sole p my personal information he anding Order Mandate with	urpose of maintaining contact ld by The Retired Prison Gov my bank to pay my annual	with, and informing me ernors Association, and	embers of, matters rela withdraw this authority	ting to the ong y at any time,	ta Protection Act 2016, names, address going business of The Association. I als by contacting the Membership Secreta ear inclusive of a PGA diary or £13/ye
Signed							
Date			<u>Members</u>	hip Level. W	ith Diary (£20	0)	No Diary (£13)
	Please detach an	d return to: Kevin E	Billson, 37 Galswort	•	• •		•
Please c	omplete and detach thi		NK STANDING with your details and <sub>l</sub> set up the Standing C	forward this to you	ır bank, or if you	have acce	rss to On-Line banking you co
TO:	The Manager					Ban	ık plc
	Branch Address						
	Sort Code						
	Account Name			_			
	Account No						
	PLEA	SE MAKE PAYI	MENTS DETAIL	ED BELOW a	nd DEBIT M	Y ACCC	DUNT
Name (	of Payee.	RETIF	RED PRISON GO	VERNORS			
	nts to be made to:	PO BO	CLAYS BANK plo OX 11, NORTH S VICKSHIRE, CV	TREET, RUGI	3Y,		
	nt Number.	50125	<b>113</b> Se	ort Code 20-	73-48		
Please	Pay:		wenty pounds) hirteen pounds)		GA Diary	Delete apply.	which does not
Each Y	EAR commencing	g on		ા	ıntil further n	otice.	
Signed	l						
Date						-	
Print N	Jame						
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ı taul es	<del>,</del>						