



G.W.R. PRESERVATION GROUP LIMITED

Membership Application form

Membership Application

Please complete this form and send with your subscription to:

G.W.R. Preservation Group Limited
1 Wellesley Crescent, Twickenham, Middlesex, TW2 5RT.

☎ 020-8574-1529 www.gwrpg.co.uk Email: info@gwrpg.co.uk

Title: Surname:

First Names:

Address:

..... Postcode:.....

Tel (day): (evening):

Email:

Age (if under 18): Occupation:

For family applications, please enter names below.

2. (Adult partner):

Children under 18:

3. Age:

4. Age:

5. Age:

I am applying to become a (please tick)

FULL MEMBER¹

ASSOCIATE MEMBER

of the G.W.R. Preservation Group Limited.

¹Must be accompanied by a minimum purchase of £25.00 shares.

Please tick preferred form of membership

Adult £15.00 Family £20.00

Junior (under 18) £7.50 Senior Citizen Family £10.00

Senior Citizen £7.50 Adult Life £180.00

Student² £7.50 Family Life £240.00

Unemployed² £7.50 Senior Citizen Life £90.00

²Please provide documentary proof of full time attendance at an educational establishment or a copy of Form UB40 as appropriate.

With the exception of life membership categories, all forms of membership are renewable annually by payment of the appropriate subscription.

I enclose subscription: £

I also enclose payment for the following:

Company Shares (£25.00 minimum): £

Development Bonds (£100, £250, £500, £1,000) £

GWRPG Steam Supplement: £

..... number(s) in 200 Club (@ £25.00 per year) £

Donation: £

Total enclosed: £

Please enclose crossed cheque/postal order payable to:
"G.W.R. PRESERVATION GROUP LIMITED"

Please sign the declaration opposite

Membership Application (continued)

Please detail any skills and experience which can help the Group:

.....
.....

Please tick any areas in which you would be willing to participate:

Restoration & maintenance Event organisation

Locomotive operation Stewarding at events
& maintenance

Sales Refreshments

Administration Fund raising

Publicity & advertising

Is there any other way in which could help the Group?

.....
.....

Would you require any specific facilities (eg as a result of a disability) to enable you to participate in Group activities?

.....
.....

How did you first hear about the G.W.R. Preservation Group?

.....
.....

Health & Safety – in accordance with the Group's Health & Safety policy, all members will undertake a safety course to ensure the safety and well-being of themselves, other members & the public.

Junior Members – under the age of 14 must be accompanied by an adult who will be responsible for the child at all times.

Data Protection – as membership records are held on computer, the Group has registered with the Data Protection Registrar.

Acceptance – I understand that my application for membership is subject to acceptance by the G.W.R. Preservation Group Limited.

Aims & Objectives – I am aware of and in agreement with the aims and objectives of the G.W.R. Preservation Group Limited and accept all decisions determined under the Company structure.

Signature: Date: / /

For official use

Date received / / Type

Tel welcome / / Category

Amount received £..... Approved / /

Cash/chq/PO no. Acknowledged / /

Member no. Mgrs advised / /

REGISTERED OFFICE: 16 GRANGE CLOSE • HESTON • MIDDLESEX • TW5 0HW
COMPANY REGISTRATION NO. 2672874 • VAT REGISTRATION NO. 224 6879 39

www.gwrpg.co.uk