Sevenoaks Camera Club

Membership Application / Renewal - 2026-27 season

Please complete this form and email to the Membership Secretary via <membership@sevenoakscameraclub.org.uk>

	Member 1	**Other Members (if joint or family membership)**
Membership Type	Single Adult. / Joint Adult / Student (under 25 in full time education)	Two adults, or other family members, living at same address
Forename		
Surname		
Email address		
Postal Address		Same as Member 1
Post Code		
Telephone No.		
Mobile No.		

For new members only:

How did you hear about the club?

The current (2026-2027) annual Membership subscriptions are:

Adults Single £55 ☐ Check Box **Adults Joint** £88 ☐ Check Box **Students** £25 ☐ Check Box

A full year's subscription is payable by anyone joining up to 31 December in a season.
New member(s) attending their first meeting after 31 December pay(s) only half the relevant subscription.
All renewal subscriptions are due by 31st October each year.

Please confirm that you have read the data protection policy available on the website* or from the General Secretary:- ☐

Please read the **Club Constitution** & the **Safeguarding Policy** available on the website*

The Club's **Competition Rules** can also be found on the website*

* *These can be found on the Rules & Policies page at <www.sevenoakscameraclub.org.uk/clubpage/rules-and-policies>*

PAYMENT

Electronic payment direct to our bank account. You **MUST** include your name as a Reference when doing so and provide payment details in the section below. **NB** Some online banking systems limit the characters that be used for the account name. In such cases then shorten the name to e.g. Sevenoaks CC. Our sort-code and account number are essential.

Account name: Sevenoaks Camera Club **Sort code** 20 76 55 **Account number** 60808903

Amount sent £ **Payment reference** **Payment date**

It would be appreciated if the above payment method is used by all members. In the event of exceptional circumstances where this is not possible please refer to the Membership Secretary.

Date form completed: