



DERBYSHIRE CAVING ASSOCIATION

FOUNDED 1960

INDIVIDUAL MEMBERSHIP APPLICATION

Please **PRINT** the details

Name _____

Address _____

_____ Post Code _____

Phone _____

Email _____

Note that if you give us an email address we would normally expect to use it to send DCA Information Circulars, Minutes and Agendas. Please let us know if you would prefer that we POST these items to you instead. We will always post your copies of "The Derbyshire Caver". The DCA Annual Report and the DCA Handbook.

Current annual subscription rates: £ 7.00 - special rate for Direct Individual Members of BCA
£10.00 - Club Individual Members of BCA or non-BCA members

Note: If you are not currently a Direct Individual Member of the British Caving Association (BCA) but would like to join BCA as well as DCA, ask for a BCA Individual Member Application form to be sent to you or download one from the BCA website at www.british-caving.org.uk.

Amount Enclosed: One-off Entry Fee _____ (currently £2.00)

** Delete as applicable: 1 year's subscription to DCA _____ ** (Ind. BCA Memb. No. _____)
** (Ind. BCA Membership applied for.)
** (Not a BCA Direct Individual Member.)

TOTAL ENCLOSED _____ (Make cheques etc. payable to D.C.A.)

I wish to apply for membership of Derbyshire Caving Association. If elected, I agree to abide by the Constitution of the Association.

Signature _____ **Date** _____

Signature of proposer
(May be DCA Officer, Individual DCA Member or Secretary of Member Club) _____

Name of proposing member club (Delete if not applicable) _____

*Note that membership details are held on a computer database to enable DCA to maintain subscription records and circulate material to members. This information will not be made available to anyone outside the Association without your permission. If you do **not** wish your membership details to be held on a database in this way, please notify the DCA Secretary by signing the declaration below.*

*Please note that I do **not** wish membership details to be held on a computer database. Sign.* _____ *Date* _____

Please return the completed form with your cheque to:

DCA Hon. Secretary, 3 Greenway, Hulland Ward, Ashbourne, Derbyshire. DE6 3FE.

If you have any queries, please contact the Secretary on Tel. 01335-370629 or Email secretary@theDCA.org.uk

Date accepted as DCA Member _____ Memb. Receipt No. _____

Signed _____ DCA Hon. Secretary