

# Cumbria Woodturners Association

To comply with the Data Protection Act, and for membership purposes, please complete and sign the following:

**Name** .....

**Address** .....

**Telephone** .....

**Email** .....

- 1. Please tick to indicate that you understand and accept these are required for membership.
- 2. Please tick to indicate permission to include your details in a list distributed to CWA members.
- 3. Please tick to indicate consent to use any CWA group photographs on website or other publications.
- 4. Please tick to indicate that others sharing your details (partners, spouses, etc.) have been notified of the above points.


Signed ..... Date .....