CREDIT CARD PAYMENT DETAILS

MasterCard Visa		
Name on Card:		
Card No:		
Expiry Date:		
Amount:		
Signed:	Date:	<i>I</i>
As part of the application process we preferences regarding any marketing co		,
Club Talk (post, UK only) (third party mailing supplier, does not apply to Serving Armed Forces Members)		
Events Offers		
Club Talk (electronic) (third party emailing supplier)		
Club Life (email) (third party emailing supplier)		
Membership Survey (third party research company)		
How did you hear about us?		
Online Word of mouth Prin	nt advertising	ocial Media
Other (please state)		



63-79 Seymour Street, London W2 2HF
0207 616 8312 | mem@vsc.co.uk | www.vsc.co.uk
Registered Charity Number: 261307 (England)

ONLINE APPLICATIONS

Join online now at www.vsc.co.uk or return completed form to: Victory Services Club, 63-79 Seymour Street, London W2 2HF

To enable us to validate your Membership application a reasonable amount of personal data, will be processed both manually and electronically to ensure the eligibility criteria, this will form part of a contractual obligation as described in the General Data Protection Regulation (EU) 2016/679 [GDPR], Art 6(b). The Victory Service Club will treat that personal data fairly, responsibly, and in a transparent manner.

We will apply ethical best practice at the root of decision making, while protecting your privacy and confidentiality, as described in our GDPR Policy. A full version of the Club's GDPR Policy is available online, through the Members Portal, or in print, on request, at the Club.

SERVING ARMED FORCES APPLICATION FORM APPLICANT'S DETAILS

Forename:
Surname:
Rank:
Regt/Service Number:
Address:
Postcode:
Tel:
Mobile:
Email Address:
Date of Birth:/
Navy/Marines
Army
☐ Air Force
F 1 (C : D : (C)) / /
End of Service Date (if known):/
JOINT APPLICANT
,
JOINT APPLICANT Title:
,
Title:
Title:
Title: Forename: Surname: Address:
Title: Forename: Surname:
Title: Forename: Surname: Address:
Title: Forename: Surname: Address:
Title: Forename: Surname: Address:
Title: Forename: Surname: Address: Postcode: Tel:
Title: Forename: Surname: Address: Postcode: Tel: Mobile:
Title: Forename: Surname: Address: Postcode: Tel:
Title: Forename: Surname: Address: Postcode: Tel: Mobile:
Title: Forename: Surname: Address: Postcode: Tel: Mobile: Email Address:



MEMBERSHIP APPLICATION FORM

VSC11316 - Updates to the Membership Application Form V3.indd 1 25/04/2018 12:45:48

Army
Air Force

PART 1: APPLICANT'S DETAILS

For Former Serving Person (Part I), Family (Part I & 3),
Widows/Widowers (Part I & 3) and Joint Membership (Part I & 2)

Title/Rank Now Used:

Forename:

Surname:

Please specify in which of the Services you served in:
(Former Services applicants only)

Navy
Army
Air Force
Other
If other please specify:
Regt/Service Number: (if known)
Rank/Rating on Discharge/Retirement:
Address:

Country:

Postcode:

Tel:

Mobile:

Email Address:

Nationality:

If this application is accepted I agree that my membership of the Club is to continue from year to year and unless I give written notice to the Secretary of my intention to resign before the annual renewal date in any one year, that I shall be liable to pay the membership fee for the succeeding year. I hereby confirm that in taking up membership, I recognise that I am a Club Member of the Victory (Services) Association Ltd and am bound by the Memorandum and Articles of the company and the Club Rules.

Signed: Date: /..../



Male: Female:

Please complete the Direct Debit form, cash, cheques and credit cards also accepted.

Date of Birth:/...../

PART 2: JOINT APPLICANT

To be completed by the spouse of the person named in Part I, if a joint membership is required

litle/Kank Now Used:
Forename:
Surname:
Please confirm the following:
Relationship with Applicant:
Address: (if different from Part I)
Town:
Country:
Postcode:
Tel:
Mobile
Email Address:
Nationality:
Male: Date of Birth:

I agree to be bound by the rules for membership as stated in ${\bf Part}\ {\bf I}$ of this application. I also understand that should my spouse cease to be a Member, my own Membership will cease automatically except in the case of the death of my spouse, if my spouse was a former serving member.

PART 3: DETAILS OF PERSON PROVIDING THE ELIGIBILITY CRITERIA

Please confirm the service details of the person providing you with eligibility (if applicable)

Rank/Title:
Surname:
Forename:
Service Number:
Relationship with Proposer:



Please complete the Direct Debit form, cash, cheques and credit cards also accepted.

DIRECT DEBIT APPLICATION FORM

Instructions to your Bank or Building Society to pay by Direct Debit

Originator's identification number: 991875

Please fill in the whole form using a ball point pen and send it to: The Victory Services Club, Membership Dept,

63-79 Seymour Street, London W2 2HF

Name and full postal address of your Bank or Building Society:

To the Manager:

Postcode:	
Name(s) of Account Holder(s):	
Branch Sort Code:	••
Bank/Building Society Account Number:	

INSTRUCTION TO YOUR BANK OR BUILDING SOCIETY

Please pay The Victory (Services) Association Ltd Direct Debits from the account detailed in this instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this instruction may remain with The Victory (Services) Association Ltd and if so details will be passed electronically to my Bank/Building Society.

Signed:	Date:/	

Banks and Building Societies may not accept Direct Debit instructions for some types of accounts.



The Direct Debit Guarantee

The guarantee is offered by all banks and building societies that take part in the Direct Debit Scheme. The efficiency and security of the scheme is monitored and protected by your own Bank or Building Society. If the amounts to be paid or the payment date changes The Victory (Services) Association Ltd will notify you 10 working days in advance of your account being debited or as otherwise agreed.

If an error is made by The Victory (Services) Association Ltd or your Bank or Building Society, you are guaranteed a full and immediate refund from your branch of the amount paid. You can cancel a Direct Debit at any time by writing to your Bank or Building Society. Please send a copy of your letter to us.

This guarantee should be detached and retained by the payer.