

PART 1: APPLICANT'S DETAILS

For Former Serving Person (Part 1), Family (Part 1 & 3), Widows/Widowers (Part 1 & 3) and Joint Membership (Part 1 & 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:.....

Town:.....

Country:.....

Postcode:.....

Tel:.....

Mobile:.....

Email Address:.....

Nationality:.....

Male: Female: Date of Birth: / /

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: / /

PART 2: JOINT APPLICANT

To be completed by the spouse of the person named in Part 1, if a Joint membership is required

Title/Rank Now Used:.....

Forename:.....

Surname:.....

Please confirm the following:

Relationship with Applicant:.....

Address: (if different from Part 1).....

.....

Town:.....

Country:.....

Postcode:.....

Tel:.....

Mobile.....

Email Address:.....

Nationality:.....

Male: Female: Date of Birth: / /

I agree to be bound by the rules for membership as stated in Part 1 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:.....

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:

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Bank/Building Society Account Number:

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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.

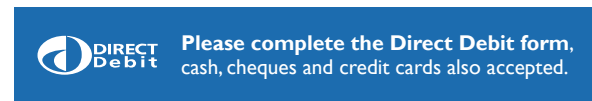
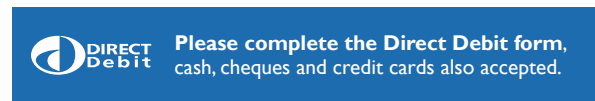
The Direct Debit Guarantee



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.



CREDIT CARD PAYMENT DETAILS

MasterCard Visa

Name on Card:

Card No:

Expiry Date:

CVV Number:

Amount:

Signed: Date: / /

As part of the application process we would like to learn your preferences regarding any marketing communication from the Club.

	Opt in	Opt out
Club Talk (post, UK only) <small>(third party mailing supplier, does not apply to Serving Armed Forces Members)</small>	<input type="checkbox"/>	<input type="checkbox"/>
Events Offers	<input type="checkbox"/>	<input type="checkbox"/>
Club Talk (electronic) <small>(third party emailing supplier)</small>	<input type="checkbox"/>	<input type="checkbox"/>
Club Life (email) <small>(third party emailing supplier)</small>	<input type="checkbox"/>	<input type="checkbox"/>
Membership Survey <small>(third party research company)</small>	<input type="checkbox"/>	<input type="checkbox"/>

How did you hear about us?

Online Word of mouth Print advertising Social Media
 Other (please state)



VICTORY SERVICES CLUB

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

End of Service Date (if known): / /

JOINT APPLICANT

Title:

Forename:

Surname:

Address:

Postcode:

Tel:

Mobile:

Email Address:

Date of Birth: / /

Navy/Marines
 Army
 Air Force



VICTORY SERVICES CLUB

MEMBERSHIP
APPLICATION FORM