

New Membership Application



Shetland
Family History Society

Membership
Number

Name: _____

Address: _____

Post Code: _____

Telephone _____ E-mail _____

Date _____

Names being Researched:

1. _____ 2. _____ 3. _____

Category: (✓ box.)

Amount Enclosed: £ _____

In accordance with the Data Protection Act 1998, member's **personal** details are stored on computer for administration purposes only. This information will not be given, lent or sold to any third party.

Personal information supplied & names being researched will be printed in the membership list in the Society Journal "Countin Kin".

If you object to this please indicate so here: _____

Genealogical data held by the Society, including information on Ancestor Charts may be accessed by others doing research.

Please make your cheque / PO payable to SHETLAND FAMILY HISTORY SOCIETY and send to:
The Membership Secretary, Shetland Family History Society, 6, Hillhead, Lerwick, Shetland, ZE1 0EJ, Scotland, U.K.

For Society Use Only:

Membership Pack Sent.....Amount Received:.....