

Please supply enough detail to ensure that we can contact you efficiently, and as much additional information as you are happy for us to hold about you.

Apart from your full name, we only need details that you have not supplied to us before.

Title (Dr, Mr, Mrs, etc)	
First Name	
Family Name	
Distinctions	
Address	
Town	
County	
Postcode	
Home Telephone	
Mobile Telephone	
Office Telephone	
Email	
Alternative email	
RPS Membership Number	(enter RPS Membership Number, or, if not known, tick if a member)
RPS DIG member?	(tick if a member of the DI Group of the RPS)
Season Ticket?	(tick if you have already applied for a Season Ticket for the current year)
First visit?	(tick if yes)
Photographic club(s) of which you are member?	
How did you hear about your first Thames Valley Centre event?	
I consent to the RPS Digital Imaging Group Thames Valley Centre holding my personal data, which it will use solely for Group purposes	Signed:
	Date:

