Application form for membership of Epsom and Ewell Art Group (EEAG)

Title	Mr / Mrs / Miss / Ms /
Full name	
Address	
Post code	
🕾 daytime	
🕾 evening	
🕾 mobile	
Email	
Age (optional)	Applicants must be over 18
Date	
How did you hear about us?	

Please tick this box if you are happy for your email address to be shared with other members of EEAG.

Please send this completed form and cheque (made payable to *Epsom and Ewell Art Group*) to:

Julie Willis (Membership Secretary)

The mobile:07751 979609Email:eeagmembership@gmail.com

Epsom and Ewell Art Group undertakes to collect and use your personal data in compliance with the General Data Protection Regulation. Our legal basis for processing this data is our legitimate interest as an art group. We use the data for the administration of your membership, the communication of information and the organising of events. Information will not be shared with any other body and information will be destroyed when you are no longer a member.