

BRITISH FEDERATION OF BRASS BANDS

MEMBERSHIP APPLICATION FORM

Band Name:

Band Web Site

Primary Contact Name:

Address:

Post Code: Telephone:

e-mail:

Secondary Contact Name:

Address:

Post Code: Telephone:

e-mail:

I give authority for our band information to be published on the BFBB website

I do not give authority for our band information to be published on the BFBB website

Signature Date

Please return the completed form in the enclosed pre-paid envelope , with your annual membership fee of £100, (cheques made payable to British Federation of Brass Bands)

Data Protection:

This data is held for the purposes of the B.F.B.B. and will be released to third parties only when we consider that the purpose is consistent with our registration purpose.