



EARS

East Anglian Rocketry Society

Membership Application form.

All memberships are valid from the 1st January to 31st December in any one year.

Title	First name (s)
Surname	
Address	
Postcode	
Home Phone	Mobile
Date of Birth	
Email	
Current EARS membership number	<i>Please list family member / parent & child details on reverse of form</i>
UKRA / BMFA membership number <i>(if known)</i>	

Please select membership type(s) required.

Ordinary HPR £18 Junior HPR £18 Junior Model £13
Family (Adult + Partner+Children Under 16) £35 Associate £5

Please list additional members details on reverse.

I enclose a cheque / cash / postal order for £
made payable to "EAST ANGLIAN ROCKETRY SOCIETY"

Return to :
**East Anglian Rocketry Society,
Membership Secretary,
24 Wolston Meadow, Middleton, Milton Keynes MK10 9AY**

I hereby agree to abide by the East Anglian Rocketry Society rules and regulations.
I understand that these will be enclosed in the full membership pack, and are available upon request.
I have signed as Parent / Guardian for person/s under 18.

Signed

Print Full name

Date

Additional family member details

Name

Address if
different
from that
overleaf

Date of
Birth

Relationship to
primary member

BMFA/ UKRA
EARS membership
numbers (if known)

Signed

Name

Address if
different
from that
overleaf

Date of
Birth

Relationship to
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Signed



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EARS Website Members Directory Opt In

We would like to include members contact details in a **Members Directory** in the **Members Only Area** of the EARS web site. We held a poll and the vote was in favour of contact details being published. The **Members Only Area** of the website is password protected. Your login details will be emailed to you as soon as we have processed your application.

Members have to “Opt In” to having their details published. You can choose any combination of the options listed below. If you choose not to “Opt In” no details will be published in the **Members Directory**.

If you wish your details to be included in the directory please put a cross in the appropriate boxes.

We will not publish contact details for members under 16.

I _____ agree to the following details being published in the **Members Directory** in the **Members Only Area** of the EARS website.

Postal Address
Home Phone Number
Mobile Phone Number
Email Address

Signed:

Date:

If there are additional members in your family please complete a form for each member.