



Member's Personal Details Form

The information below will be kept on the Trefoil Guild database which will be held in accordance with the 1998 Data Protection Act.

Please complete the form in block capitals

Title _____

First name _____ Middle name _____

Last name _____

Name you like to be known by _____

Address _____

_____ Post Code _____

Telephone number _____

Work Telephone number _____

Mobile number _____

Email address _____

Date of Birth _____ day/month/year Male Female

Membership type Full Associate Affiliate

What year did you join the Trefoil Guild? _____

Present Guild name (as on the Guild Registration Certificate) _____

Guiding County _____ Guiding Country/Region _____

Role/Appointment in Guild Chairman Secretary Treasurer

Magazine Secretary Member

Date of Role/ Appointment _____

By signing this form I agree to my information being held on the Trefoil Guild database. The information will be used for Trefoil Guild purposes only.

Signed _____ dated _____

From time to time I may appear in photographs & I agree to the photographs being used for Trefoil Guild purposes, i.e. in the magazine, annual report, website.

Signed _____

Once completed please send this form ASAP to:

The Trefoil Guild Office, Girlguiding UK, 17 -19 Buckingham Palace Road, London, SW1W 0PT



Personal Details Amendment Form

Please amend your details as necessary

Original Personal details

Amended Details:

Title and Name:		
Last Name:		
Address:		
Town/City:		
Post Code:		
Guild Name:	Current:	New:
Guiding County:		
Country Region:		
Membership Type:	Full member Associate Affiliate	Full member Associate Affiliate
Date of Birth:	(DD/MM/YYYY)	(DD/MM/YYYY)
Telephone - Home:		
Telephone - Work:		
Telephone - Mobile:		
Email:		

Details of current role in above Guild:

Role/Appointment:	Start Date	Date Role Ended

Any other amendments:

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Signed _____ dated _____

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Signed _____

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