

POACHER HARNESS CLUB FRIENDS MEMBERSHIP FORM 2026

PLEASE COMPLETE ALL PARTS OF THIS FORM.

ADDRESS FOR RETURN OF FORM:

CAROL WOOD, MILL HILL, MARSH LANE, NEW HOLLAND, NORTH LINCOLNSHIRE, DN19 7PY.

TELEPHONE NO: 01469 533824 OR 07967 191653

NAME(MR, MRS, MS):.....

ADDRESS:

.....

.....

PHONE:

EMAIL (IMPORTANT):

I HEREBY AGREE TO ABIDE BY PHC RULES OF COMPETITION AND BY THE PHC CONSTITUTION (2024)

IN ORDER TO COMPLY WITH THE DATA PROTECTION ACT 2018, WE NEED TO MAKE YOU AWARE THAT ANY DATA OR INFORMATION PROVIDED TO **POACHER HARNESS CLUB** FOR THE PURPOSES OF MEMBERSHIP AND OTHER **POACHER HARNESS CLUB** ACTIVITIES WILL BE HELD ON A COMPUTER DATABASE OR OTHERWISE. WE WILL NOT SHARE YOUR INFORMATION WITH ANYONE OTHER THAN **POACHER HARNESS CLUB** MEMBERS. PLEASE DELETE THE FOLLOWING STATEMENT AS APPLICABLE.

I **WILL BE** HAPPY / I **WILL NOT** BE HAPPY FOR MY CONTACT INFORMATION TO BE GIVEN TO OTHER CLUB MEMBERS.
I **WILL BE** HAPPY / I **WILL NOT** BE HAPPY FOR MY CONTACT DETAILS TO BE GIVEN TO BRITISH CARRIAGEDRIVING.

SIGNATURE.....

Date

1 YEAR FRIEND OF POACHER MEMBERSHIP £10 PER PERSON

PLEASE MAKE CHEQUES PAYABLE TO **POACHER HARNESS CLUB** OR MAKE PAYMENT BY BACS TO **POACHER HARNESS CLUB, S/C 40-32-05, A/C No: 11372629**