



## Application for Membership of a Country Market Society (Completion of this form is compulsory for all new Members)

I wish to apply for Membership of			
I agree to abide by the Society's Rules, by the policies of Country Markets Ltd as set out in the Country Markets Handbook and its periodic updates, and with current legislation. I acknowledge that the Society is an agent for the purposes of selling my goods at the Market.			
I wis	sh to produce [please tick all that apply]:	l am	n [please tick one]:
	Food		16-75 years of age
	Gardening		76-80 years of age
	Craft		81 years or over
	Non producer e.g. treasurer, helper	(this	information is required for insurance purposes)
Name: Tel No:			
Address			
(inc postcode):			
Email:			
Signature:		Date:	
Data Protection Act: Data on Members will be held by the Society and Market as Data Controllers for the purposes of maintaining the Register of Members, Member records and financial accounts. The Society's and Market's nominated officers are the representatives under the Act.			