

Membership Form 2019/2020



PERSONAL DETAILS (PLEASE PRINT)

Mr Mrs Ms Dr Other

Name:

Address:

Post Code:

Age Group: below 50 50-59 60-69 70-79 80+

Telephone No:

Email:

Please indicate a class attended/enrolled from a previous or current programme at the Centre for Lifelong Learning. **This is a requirement for membership.**

Do you have any special needs or disabilities which may affect your learning? YES NO

If "Yes", is your disability mobility related? YES NO

For further information on guidelines for 3Ls members and Clubs, visit our website (3ls.website) or see the 3Ls Noticeboard in the Centre.

PRIVACY STATEMENT

Your personal details will be stored in a secure database and will be used solely for the purposes of administration and communication of 3Ls Students' Association and 3Ls Clubs matters.

They will never be supplied to an outside agency or party.

The 3Ls Students' Association may use photographs taken at meetings and events for publicity purposes and/or on our website.

Such photographs will not be captioned with names unless prior permission has been sought.

Please be aware that you can withdraw consent at any time for your data to be used for any of the above purposes by contacting the 3Ls Office at the address below.

I consent to my data being used in accordance with the Privacy Statement.

PAYMENT: the membership year runs from 1/9/19 until 31/8/20

I enclose £10 cash

I enclose a cheque for £10
made payable to 3Ls Students' Association

Signature:

Date:

**Return to: 3Ls Students' Association, Centre for Lifelong Learning, University of Strathclyde,
40 George Street, Glasgow G1 1QE**