

# JOIN TODAY AND RECEIVE HALF PRICE SYNDICATE/GROUP MEMBERSHIP

To become a Syndicate/Group member please complete the form and return to the address below with your payment. Syndicate/Group membership of the Countryside Alliance is available to any group, club or syndicate with seven members or more. All named members of the group are full members of the Countryside Alliance and are covered by our insurance policy as individuals

## GROUP MEMBERSHIP

### \*SPECIAL OFFER - HALF PRICE MEMBERSHIP FOR FIRST YEAR\*

Seven people with an annual payment of £182 (usually £384.00)  
Each extra person add an annual payment of £26 (usually £52.00)

Name of Group

Number of Members  Total cost £   
(minimum of seven)

The Countryside Alliance is a registered data controller. As a member of the Countryside Alliance we will use the data you provide us with for marketing, statistical and analytical purposes and to administer your insurance. You will receive membership communications and we will keep you up to date with our work and promotions. The Alliance sometimes allow carefully screened organisations to contact our supporters. This can help raise valuable funds to help our work. I am happy to receive these communications by: Post  Email

## PAYMENT

We would like to pay by debit/credit card  Visa  Mastercard  Maestro  Delta

Card No

Valid From  Valid To  Issue No  Security Code

Name On Card

We would like to pay/donate by cheque. Please make your Cheque payable to Countryside Alliance and return it to us with this completed form.

Date

Signature of person responsible for payment  Recruiter Code

The Countryside Alliance is an appointed representative of Countryside Alliance Insurance Services Ltd which is authorised and regulated by the Financial Services Authority in respect of general insurance business. Please note that neither the Countryside Alliance nor Countryside Alliance Insurance Services Ltd are able to provide personal advice to prospective or actual members concerning the suitability or adequacy of the insurance membership benefits. Consequently you will need to satisfy yourself that the benefits are appropriate for your particular circumstances or seek professional advice. For further information, please call the Countryside Alliance insurance helpline provided by Howden UK Group Ltd on 01234 311255.

## PERSONAL DETAILS OF GROUP LEADER GROUP MEMBER 1

(Please use BLOCK CAPITALS)

Title  Surname  First Name  DOB

Address

Post Code

Email  Tel No.

## PERSONAL DETAILS OF GROUP MEMBER 2

Title  Surname  First Name  DOB

Address

Post Code

Email  Tel No.

## PERSONAL DETAILS OF GROUP MEMBER 3

Title  Surname  First Name  DOB

Address

Post Code

Email  Tel No.

**Return to: Countryside Alliance 1 Spring Mews Tinworth Street London SE11 5AN**

Please photocopy this page to include details of additional members

**PERSONAL DETAILS OF GROUP MEMBER 4**

Title	<input type="text"/>	Surname	<input type="text"/>	First Name	<input type="text"/>	DOB	<input type="text"/>
Address	<input type="text"/>						
	<input type="text"/>					Post Code	<input type="text"/>
Email	<input type="text"/>					Tel No.	<input type="text"/>

**PERSONAL DETAILS OF GROUP MEMBER 5**

Title	<input type="text"/>	Surname	<input type="text"/>	First Name	<input type="text"/>	DOB	<input type="text"/>
Address	<input type="text"/>						
	<input type="text"/>					Post Code	<input type="text"/>
Email	<input type="text"/>					Tel No.	<input type="text"/>

**PERSONAL DETAILS OF GROUP MEMBER 6**

Title	<input type="text"/>	Surname	<input type="text"/>	First Name	<input type="text"/>	DOB	<input type="text"/>
Address	<input type="text"/>						
	<input type="text"/>					Post Code	<input type="text"/>
Email	<input type="text"/>					Tel No.	<input type="text"/>

**PERSONAL DETAILS OF GROUP MEMBER 7**

Title	<input type="text"/>	Surname	<input type="text"/>	First Name	<input type="text"/>	DOB	<input type="text"/>
Address	<input type="text"/>						
	<input type="text"/>					Post Code	<input type="text"/>
Email	<input type="text"/>					Tel No.	<input type="text"/>

**PERSONAL DETAILS OF GROUP MEMBER 8**

Title	<input type="text"/>	Surname	<input type="text"/>	First Name	<input type="text"/>	DOB	<input type="text"/>
Address	<input type="text"/>						
	<input type="text"/>					Post Code	<input type="text"/>
Email	<input type="text"/>					Tel No.	<input type="text"/>

**PERSONAL DETAILS OF GROUP MEMBER 9**

Title	<input type="text"/>	Surname	<input type="text"/>	First Name	<input type="text"/>	DOB	<input type="text"/>
Address	<input type="text"/>						
	<input type="text"/>					Post Code	<input type="text"/>
Email	<input type="text"/>					Tel No.	<input type="text"/>

**Return to: Countryside Alliance 1 Spring Mews Tinworth Street London SE11 5AN**

Please photocopy this page to include details of additional members

**PERSONAL DETAILS OF GROUP MEMBER 10**

Title	<input type="text"/>	Surname	<input type="text"/>	First Name	<input type="text"/>	DOB	<input type="text"/>
Address	<input type="text"/>						
	<input type="text"/>					Post Code	<input type="text"/>
Email	<input type="text"/>					Tel No.	<input type="text"/>

**PERSONAL DETAILS OF GROUP MEMBER 11**

Title	<input type="text"/>	Surname	<input type="text"/>	First Name	<input type="text"/>	DOB	<input type="text"/>
Address	<input type="text"/>						
	<input type="text"/>					Post Code	<input type="text"/>
Email	<input type="text"/>					Tel No.	<input type="text"/>

**PERSONAL DETAILS OF GROUP MEMBER 12**

Title	<input type="text"/>	Surname	<input type="text"/>	First Name	<input type="text"/>	DOB	<input type="text"/>
Address	<input type="text"/>						
	<input type="text"/>					Post Code	<input type="text"/>
Email	<input type="text"/>					Tel No.	<input type="text"/>

**PERSONAL DETAILS OF GROUP MEMBER 13**

Title	<input type="text"/>	Surname	<input type="text"/>	First Name	<input type="text"/>	DOB	<input type="text"/>
Address	<input type="text"/>						
	<input type="text"/>					Post Code	<input type="text"/>
Email	<input type="text"/>					Tel No.	<input type="text"/>

**PERSONAL DETAILS OF GROUP MEMBER 14**

Title	<input type="text"/>	Surname	<input type="text"/>	First Name	<input type="text"/>	DOB	<input type="text"/>
Address	<input type="text"/>						
	<input type="text"/>					Post Code	<input type="text"/>
Email	<input type="text"/>					Tel No.	<input type="text"/>

**PERSONAL DETAILS OF GROUP MEMBER 15**

Title	<input type="text"/>	Surname	<input type="text"/>	First Name	<input type="text"/>	DOB	<input type="text"/>
Address	<input type="text"/>						
	<input type="text"/>					Post Code	<input type="text"/>
Email	<input type="text"/>					Tel No.	<input type="text"/>