



**The Royal Air Force  
Servicing Commando  
and  
Tactical Supply Wing Association**



**MEMBERSHIP APPLICATION FORM**

When complete please return to:

**The Membership Secretary  
RAF SCdo & TSW Assn  
31 Exeter Street  
STAFFORD  
ST17 4EF**

<b>Rank/Status</b>	<b>Christian Names</b>	<b>Surname</b>	<b>'Nickname'</b>
<b>Service Number</b>	<b>TSW Employment History: (Please use the reverse if you require additional space)</b>		
<b>Date of Birth (DD/MM/YYYY)</b>  / /	<b><u>Dates</u></b>	<b><u>Sections/Flights/Position Held</u></b>	<b><u>Rank Held</u></b>
<b>Name of Spouse / Partner</b>	----- ----- -----		
<b>Current Address</b>  ----- ----- -----	<b>Postal Address (if different)</b>  ----- ----- -----	<b>Are you Still Serving?</b>  <b>YES      NO</b>  If you are retired, please state your final rank held in the RAF.  -----	
<b>County (in Full)</b>	<b>County (in Full)</b>	<b>Do you agree to your information being shared with other Association members?</b>	
<b>Post Code</b>	<b>Post Code</b>	<b>YES      NO</b>	
<b>E-mail address:</b>			
<b>Tel:</b> <b>(Home)</b> _____ <b>(Mobile)</b> _____ <b>(Work)</b> _____	<b>Are you in contact with any past or present TSW Members? If so, please write their contact details (or last known address) on the reverse of this Form.</b>  <b>PTO                      NO</b>		
<b>I wish to become a member of the Association and confirm that I have passed my completed Standing Order mandate to my Bank */ *or enclose a cheque for £10.00 for my 1<sup>st</sup> years annual subscription. (Note: * S.O. is the RAFSC&amp;TSW Association's preferred method of payment - delete as appropriate)</b>			
<b>Data Protection.</b> The information you included here will be used to update and confirm all personal details held within the confines of the RAFSC&TSW Association. This is in accordance with the Data Protection Act 1998 and protects your personal information. This information will be recorded onto the Association Database only, it will not be recorded anywhere else or passed to third parties.			
<b>Please sign if you agree and give consent for the information above to be recorded on the RAFSC&amp;TSW Association Database.</b>	<b>(Print) Name</b>		
	<b>Signature</b>		