



ST. THOMAS MAR THOMA CHURCH

Stackpool Road, Southville, BRISTOL, BS3 1NW
UNITED KINGDOM - Regd. Charity No. 1122211

Diocese of UK, Europe & Africa of the Mar Thoma Church
Vicariate: 24 Sherbourne Avenue, Bradley Stoke, Bristol BS32 8BB Tel. +44 (0) 117 9834521

APPLICATION FOR MEMBERSHIP

Name of applicant : _____

Address in UK : _____

E-Mail: _____ Phone/Mobile: _____

Address in INDIA : _____

Home Parish : _____

Previous Parish : _____

Have you submitted a Transfer Certificate (TC) from previous Parish? Yes No

Date of Birth : DD/MM/YYYY Marital Status: Married / Single

Date of Marriage: DD/MM/YYYY (If Married)

Details of family Members:

SL	FIRST & MIDDLE NAME(s) <i>(In CAPITAL Letters)</i>	SURNAME <i>(In CAPITAL Letters)</i>	RELATIONSHIP <i>DELETE AS APPROPRIATE</i>	DOB FORMAT
1			HUSBAND/WIFE	DD/MM/YYYY
2			SON/DAUGHTER	DD/MM/YYYY
3			SON/DAUGHTER	DD/MM/YYYY
4			SON/DAUGHTER	DD/MM/YYYY
5			SON/DAUGHTER	DD/MM/YYYY

Kindly enrol me/my family as members of St. Thomas Mar Thoma Church Bristol - UK

I/We hereby agreed to pledge an amount of £_____ /Month or £ _____/Year as subscription to meet Parish's ongoing financial needs.

A one-off Annual Payment for the Zonal Assembly £60/- per family

Parish Account Name: St. Thomas Mar Thoma Church, Bristol A/c No. 70021292 SC: 40-14-00 Ref. ex. Subscr GB NNN

Date: DD/MM/YYYY

SIGNATURE OF APPLICANT

For office use only.

Membership Accepted: _____ Date: _____/_____/_____

Vicar

Membership / Register Number:

NNN

1) **Transfer Certificate** (Yes/No) 2) **Membership Form** (Yes/No) 3) **GDPR Consent** (Yes/No) : 4) **Gift Aid Declaration** (Yes/No)



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GENERAL DATA PROTECTION REGULATION (GDPR) CONSENT FORM

The EU's GDPR (2016/679) will replace the data protection Act of 1998. GDPR seeks to give people more control over how organisations use personal data of their members. The St. Thomas Mar Thoma Church Bristol, therefore requires your consent in order to continue processing your personal data.

Title: _____ Forename : _____ Surname : _____

Name of the Parish : St. Thomas Mar Thoma Church, Bristol

E mail : _____ Mobile No. : _____

Address : _____

SL No	FIRST & MIDDLE NAMES USE BLOCK CAPITAL LETTERS ONLY	SURNAME	RELATIONSHIP DELETE AS APPROPRIATE	SIGNATURE*
1			HUSBAND /WIFE	
2			SON /DAUGHTER	
3			SON /DAUGHTER	
4			SON /DAUGHTER	
5			SON /DAUGHTER	

* Signature mandatory for all members aged 18 and above. Parents to sign and consent for children aged 17 years and below.

Please Mark with (X) in all boxes that apply:

I/We understand that my personal data such as name, postal address, photos, videos, email ID, land line and mobile numbers, Gift Aid Information will be used by the St. Thomas Mar Thoma Church, Bristol for all administrative and for propagating mission and charitable activities of the Church through postal and digital media.

I/We understand that if I/We wish to opt out any time, I/We must put it writing to the Vicar/Secretary of the St. Thomas Mar Thoma Church Bristol.

Please make sure that all boxes are appropriately marked and returned to the Vicar/Secretary of the St. Thomas mar Thoma Church, Bristol - UK.

Signature : _____ Date : _____

