



Council for Cadet Rifle Shooting

Patron: HRH The Duke of Edinburgh KG KT

President: General the Lord Houghton of Richmond GCB CBE DL

Chairman: Brig M P Lowe MBE

General Secretary: Brig (Retd) MN Pountain CBE

CCRS Membership Application – CCF Units

Annual Subscription Rate - £20, valid 7 Apr 2020 to 6 Apr 2021

If you have entered the CCF Schools' Meeting for 2020 for the first time, or have not entered in the past five years, 2020 membership is free.

Please complete the details below and post, or scan and email, to CCRS at the address/email below.

Unit Name: _____

Authorised Representative Rank, Inits, NAME _____

Correspondence Address: _____

_____ Post Code _____

I apply to join CCRS on behalf of the Unit

Signed: _____ Date: _____

Payment (*delete as necessary):

*The unit is entering the CCF Schools Meeting in 2020 and has not previously entered (free membership until 6 Apr 2021).

* The unit is entering the CCF Schools Meeting in 2020 and has not entered since 2015 (free membership until 6 Apr 2021).

*I will make payment of £20 to CCRS by BACS (16-19-26, account no 10454956). Please quote as payment reference your unit and C1100, eg St Custards – C1100. Membership will run until 6 Apr 2021.

*I will send a cheque for £20 made payable to CCRS. Please write your unit and C1100 on the back. Membership will run until 6 Apr 2021.

Please also complete and send the attached Standing Order Mandate for membership from 2021.

Standing Order Mandate

Your Bank Details:

Bank Name: _____

Address: _____

_____ Post Code: _____

Sort Code: _____

Account No: _____

Please pay to The Royal Bank of Scotland, Holt's Farnborough Branch, Lawrie House, Victoria Road, Farnborough, Hampshire GU14 7NR. Sort Code number 16-19-26, Account No 10454956, for the credit of Council for Cadet Rifle Shooting, Charity Number 1151650.

The sum of £20 on the 7th day of April 2021 and in every subsequent year until further notice.

This instruction cancels all previous instructions relating to Membership of CCRS.

With every payment please quote Membership Number _____ (CCRS to complete)

Signature: _____

Unit: _____