

ARMY AIR CORPS VETERANS' ASSOCIATION

APPLICATION FORM

PERSONAL DETAILS

Title		Initials		Surname	
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Forename(s)		Preferred Name	
Retired Rank		Post-Nominals*	
Service Number		Spouse	

*Notes include academic qualifications and professional memberships, (i.e MBE, MSc, MET)

Address			
Date Of Birth		Email Address	
Telephone Number		Mobile Number	

DATA PROTECTION

The Corps Headquarters database holds personal information in order for the Headquarters Army Air Corps and the Army Air Corps Veterans Association to provide support for its serving and retired members. We will use the information to contact you about the Charity and Corps events, process requests for Benevolence and other related Corps activity. For those serving we will use the information to administer your Days Pay Giving and any other associated business. HQ Army Air Corps are legally bound by the Data Protection Act to ensure that any data it holds on individuals is relevant, accurate and not excessive. Additionally, it must be fairly and lawfully processed, held for defined purposes, be accurate and up to date, not kept for longer than necessary, processed in line with your rights and must be secure. We will ensure that all data held on our database is treated in accordance with these principles.

Please rest assured that we will not be selling or misusing any personal data and we do not intend to contact you too often; we merely need your formal agreement for us to use your data to establish routine correspondence.

By signing this form, I am giving HQ AAC and the AACVA explicit consent to process my information for the purposes stated on this form and I confirm that the details I have provided are correct.

I agree/disagree to the following statements	Yes	No
HQ AAC and the AACVA may hold my personal data and process it in order to advise me of news updates and Corps and AACVA events.		
HQ AAC and the AACVA may hold my personal data and process it in order to process memberships and payments.		
HQ AAC and the AACVA may hold my personal data and process it for any benevolence applications.		
I wish to receive notifications of deaths, funerals and memorials.		
The AAC Journal has moved to digital format. When published, a small number of hard copies will be available. I wish to receive a hard copy of The AAC Journal.		

*Please delete as applicable. I wish to receive Hawkeye newsletter.	*Via email	*Posted to my address.
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Signature		Date	
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