



CHANGE OF PERSONAL INFORMATION

Name:

Membership No. *(if known)*..... Email:

Please update your records with the new information I have provided below:

Address:

.....

Mobile Phone No: Landline No:

Email address:

Change of name:

By submitting this form, I give consent to my personal data being held and processed by IDHS(GB) in accordance with the Society's Privacy Policy and the General Data Protection Legislation 2018.

Please email or post this form to:

The Administrator
IDHS (GB), P.O. Box 91,
Newcastle Emlyn
SA44 9AT.

Email: admin@idhsgb.org.uk

Tel.: 03452 300 399.