



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 IDHS (GB)
Holme House, The Dale, Ainstable, Carlisle CA4 9RH

Email: admin@idhsgb.org.uk

Tel.: 01768 870523