

# Continuation sheet for Affiliate Plus membership

(for extra RSCM magazine sets)

## Membership Details *(complete as many as required)*

Affiliate Membership Name: .....

Affiliate Membership Country/Postcode .....

## Additional Contact Details *(for Affiliate Plus membership applications only – Correspondent 3)*

Title\* First name(s)\* Surname\* .....

Address\* .....

Postcode\* Email\* .....

*(\* required field)*

We will process your information in accordance with our Privacy Notice.

## Additional Contact Details *(for Affiliate Plus membership applications only – Correspondent 4)*

Title\* First name(s)\* Surname\* .....

Address\* .....

Postcode\* Email\* .....

*(\* required field)*

We will process your information in accordance with our Privacy Notice.

## Additional Contact Details *(for Affiliate Plus membership applications only – Correspondent 5)*

Title\* First name(s)\* Surname\* .....

Address\* .....

Postcode\* Email\* .....

*(\* required field)*

We will process your information in accordance with our Privacy Notice.

## Additional Contact Details *(for Affiliate Plus membership applications only – Correspondent 6)*

Title\* First name(s)\* Surname\* .....

Address\* .....

Postcode\* Email\* .....

*(\* required field)*

We will process your information in accordance with our Privacy Notice.