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| **Ms Eileen Fitzpatrick****4 Mackintosh Court****Tytler Street****Forres****IV36 1GG****fitzpatrick.eileen1@googlemail.com** |

Change of Office Bearers

Please complete this form (including consents) whenever your committee changes.

THIS IS IMPORTANT - failure may result in us not being able to contact your organisation/committee.

|  |  |
| --- | --- |
| Name of Hall/Association: |  |
| Month of AGM: |  |

|  |  |  |
| --- | --- | --- |
| Chair/Convener | Treasurer | Secretary |
| Name: | Name: | Name: |
| Address:Post code: | Address:Post code: | Address:Post code: |
| Telephone: | Telephone: | Telephone: |
| Email:  | Email:  | Email:  |

|  |  |  |
| --- | --- | --- |
| Booking Secretary | Name: | Telephone/Email: |
| Hallkeeper/Keyholder | Name:  | Telephone/Email: |

Please complete ALL parts of this form to comply with Data Protection Regulations

We need to obtain your consent for ALL of the options listed below in order to keep accurate meeting minutes and display your contact details within the MFCHA.org website (yes or no will suffice):

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Position Held | Please print your name | We have your consent to contact you | We have your consent to include your name in our published & distributed Meeting Minutes | We have your consent to publish your contact details on mfcha.org website. (e.g. Membership page, Hall Hire page etc.) |
| Chair/Convenor |  |  |  |  |
| Treasurer |  |  |  |  |
| Secretary |  |  |  |  |
| Booking Secretary |  |  |  |  |
| Key Holder |  |  |  |  |
| YOUR Main MFCHA Contact |  |  |  |  |

Submitted by:………………………………………………………………………………………….Date:………………………………………………………

You have the right to refuse consent to any processing of your data and you must inform us in writing stating this but your data will never be shared with any outside establishment beyond MFCHA business.

For further information on your rights concerning Data Protection and the information we hold on you please consult our Privacy Policy available on the MFCHA.org website.