**CLUB OFFICERS DETAILS FOR 2023**

**Please provide us with the following information about your club as they will apply after the AGM. When completing the form please write clearly in block letters and post to Catriona Themistocleous No2 Paraker Way, Seabrook, Hythe, CT21 52Q If you would prefer to complete the form electronically, please request an electronic version from** [kentfloralartsecretary@gmail.com](mailto:kentfloralartsecretary@gmail.com)

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| --- | --- | --- |
| **CLUB NAME** | | |
| **AGM Date** | **No. of Members** | **Membership Fee** |
| **Date & Time of Meeting** | | |
| **Address of Meeting Place** | | |

**Chairman** Name:

Address:

Tel No: Email:

Signature to confirm that you agree to Kent Floral Art holding your information and contacting you in connection with Kent Floral Art activities:

**Secretary Name**:

Address:

Tel No: Email:

Signature to confirm that you agree to Kent Floral Art holding your information and contacting you in connection with Kent Floral Art activities:

**Treasurer** Name:

Address:

Tel No: Email:

Signature to confirm that you agree to Kent Floral Art holding your information and contacting you in connection with Kent Floral Art activities: