

# FRIENDS OF THE ROYAL MEMORIAL CHAPEL



## APPLICATION FORMS SPRING 2020

All completed forms to be sent to:

**Friends of the RMC Sandhurst**  
*Name as detailed on form e.g. Membership Secretary*  
**c/o The Chaplains' Office**  
**The Royal Military Academy Sandhurst**  
**Camberley**  
**Surrey**  
**GU15 4PQ**

## Application to attend Friends Service and Lunch

To: Mrs Sue Richardson, c/o The Royal Memorial Chapel

I and my wife/husband/friend (please amend as necessary) wish to attend the Friends of the Chapel Morning Service and Lunch on Sunday 28<sup>th</sup> June 2020 and enclose a SAE for the return of my tickets.

I enclose a cheque for £ made payable to RMAS Central Bank. (£17 per head) {no post-dated cheques please},

**Please note that the dress code for this event, and any other at RMAS is 'Smart'**

NAME

Tel. No

I confirm that I possess an RMAS Facilities Pass or

Please arrange for a Visitors Pass to be issued. Details of my car are as follows:

Make of Car      Reg No.....

If there are vacancies I wish to bring      guest(s)

NAME OF GUEST(S)

Please arrange for a Visitors Pass for my guest(s). Details of their car are as follows:

Make of Car..... Reg No.....

Please forward to Mrs Sue Richardson by Sunday 7<sup>th</sup> June 2020

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## Application for Sovereign's Parade Tickets Summer 2020

To Graham Fleuty c/o The Royal Memorial Chapel

I wish to apply for ..... tickets for the Sovereign's Parade on 5<sup>th</sup> August 2020

**Please note that the dress code for this event, and any other at RMAS is 'Smart'**

Names:

..... Pass Holder Yes/No

..... Pass Holder Yes/No

Address .....

.....

Telephone Number..... Email Address.....

Car Make..... Model ..... Colour.....

Registration Number ..... Car Pass Yes/No

Previously attended a Sovereign's Parade Yes/No

Date attended.....

A cheque for £20 per person is attached made out to RMAS Central Bank {no post dated cheques please},

Signed..... Date.....

Please forward to Mr Graham Fleuty by Sunday 19<sup>th</sup> July 2020

## Friends of the Royal Memorial Chapel RMAS - Details of Potential Friend

To: Membership Sec, Friends of the Memorial Chapel,

From: .....

I know the following individual(s) well and have done so for. ....months / years. I believe he/she/ them to be suitable individual(s) to join The Friends.

### Details of Potential Friends

Title: Initials .....Surname: .....

Address .....

..... Postcode .....

Preferred first name(s):

Email address:..... Telephone No: .....

-  
Proposer

Signed: ..... Date:.....

Name (*Capitals*) .....

The completed form should be sent to:

Membership Secretary, Friends of the Chapel, Chapel Office, RMAS Sandhurst, Camberley, Surrey, GU15 4PQ

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For Membership Secretary's use: Submitted to Membership Committee for Approval ..... (Date)

Approval Received .....(Date):

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### **Register of Friends' Email Addresses: Please forward to Friends Membership Secretary**

I consent to allow my email address to be used to communicate directly to me by either the Friends' Officials, (Committee Members), or the Staff of the RMC Sandhurst. I understand that I may un-subscribe from the list at any time by notifying the Friends at:-

Membership Secretary, Friends of the RMC Sandhurst, c/o The Chapel Office, RMA Sandhurst, Camberley, Surrey, GU15 4PQ

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone number \_\_\_\_\_ Email \_\_\_\_\_

Signed \_\_\_\_\_

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## Application to stand for election to the committee

To: The Secretary, The Friends of the Chapel, The Royal Memorial Chapel

I wish to stand for election to the Committee of the Friends of the Chapel in 2020.

I understand that if I am elected onto the Committee I may be required to either:

If I am a member of the Committee, continue with the role I currently fill within the Committee.

If I am not presently a member of the Committee, take on the Committee role currently undertaken by the Committee member I displace.

Personal notes are attached.

Signed.....

Full Name.....

Address:

.....

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Telephone Number.....

Proposed:

Signed.....

Name.....

Seconded:

Signed.....

Name.....

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