



WORLD SHIP SOCIETY

EC Countries Membership Application Form

I wish to apply for membership of the World Ship Society for 2018 and have included details below.
I understand that my application will be reviewed by the Society's directors before it is approved.

My full name _____

My address _____

City, County, State or Province _____

Post Code & Country _____

I am a former WSS member. My previous membership number was _____

I wish to receive "Marine News" as a ___ pdf (£24) or ___ paper copy (£82) or both ___ (£82) (tick)

I wish to pay for my annual membership for 2018 by: ___ (£ cheque) ___ (credit/debit card)

Credit/Debit card details: _____ (card number)

Type of Card _____ (Valid from date) _____ (Expiry Date)

Name embossed on card _____

CVN number _____ (the last 3 digits of the number printed in the signature line on the reverse of the card)

Telephone No. (include country code + district or area code) _____

E-mail: _____ My year of birth (optional) _____

My Shipping interests _____

My signature _____ Date of Application _____

Please return this form to the WSS Overseas Membership Secretary, 51 Constable Road,
Felixstowe, IP11 7HP, United Kingdom. Email: dpomroy.wss@gmail.com