

First Applicant**Joint Applicant**

For more than two joint applicants, please photocopy this form and ensure each applicant completes and signs the form.

Name (in full) _____

Address _____

_____ Post Code _____

Email _____

Phone _____

_____ Post Code _____

I wish to become a member of Beckley & Area Community Benefit Society in accordance with the Rules and apply for:

'A' Shares**WITHDRAWABLE, INTEREST BEARING SHARES**

| | |
|---------------------------------|----------------------------------|
| <input type="checkbox"/> £250 | <input type="checkbox"/> £5,000 |
| <input type="checkbox"/> £500 | <input type="checkbox"/> £10,000 |
| <input type="checkbox"/> £1,000 | <input type="checkbox"/> £25,000 |
| <input type="checkbox"/> £2,500 | OTHER £ |

Please tick the relevant box or enter another amount

and / or

'B' Shares**NON-WITHDRAWABLE, NON-INTEREST BEARING SHARES**

| | |
|---------------------------------|----------------------------------|
| <input type="checkbox"/> £250 | <input type="checkbox"/> £5,000 |
| <input type="checkbox"/> £500 | <input type="checkbox"/> £10,000 |
| <input type="checkbox"/> £1,000 | <input type="checkbox"/> £25,000 |
| <input type="checkbox"/> £2,500 | OTHER £ |

Please tick the relevant box or enter another amount

Total value of shares applied for
at £50 per share:

£

Your bank details:

Sort Code

Account No

We need your bank details in order to pay interest.

NB: The minimum shareholding is £250 and the maximum shareholding is £100,000

Agreement:

- I have read the Share Offer Prospectus, including risk factors.
- I wish to become a member of Beckley & Area Community Benefit Society Limited
- I agree to be bound by the Terms and Conditions included in the Share Offer Prospectus and the Rules of the Society (see www.savetheabingdonarms.org)
- I understand that the Board of Directors of Beckley & Area Community Benefit Society Ltd may reject my application, and are not obliged to tell me why it has been rejected
- I consent to receiving formal notices by email and links to formal documents on the Society's website
- I am 18 or over

Signed as a Deed:

Signature(s) (ALL APPLICANTS TO SIGN)

Name(s) Date

Please return your completed application form and payment to:

The Treasurer, Beckley & Area Community Benefit Society Ltd, c/o Moorleys, Woodperry Road, Beckley, Oxford, OX3 9UY

Method of payment:

- ☐ I enclose a cheque made payable to Beckley & Area Community Benefit Society Ltd.
- ☐ I have paid by online bank transfer to The Cooperative Bank: **Sort Code 08-92-99 Account No 65807947**

Data protection

The data provided by you on this form will be stored within a computerised database. This data will be used only for Beckley & Area Community Benefit Society purposes, and will not be disclosed to any third party.

Notices by email and documents on our website

We would like to send you formal notices by email and refer you (by email) to documents posted on our website. By signing this form you are consenting to receiving such notices by email and accessing documents through our website.

Holding shares on behalf of children and nomination of shares on death

(PLEASE USE CAPITAL LETTERS)

You can choose to:

- Hold shares on behalf of children and/or
- Nominate a person to whom you wish your shares to be transferred on your death.

Please fill in the relevant sections below

Holding shares on behalf of children

If you wish to hold shares on behalf of someone who is under 18, please fill in that person's details below.

| |
|--|
| First name(s) in full |
| Last name |
| Date of birth |
| Address (if different from that supplied on application form overleaf) |
| Postcode |

Nomination of shares on your death

You can nominate a person aged 18 or over to whom you wish your shares to be transferred on your death. Beckley & Area Community Benefit Society Limited will respect your wish in so far as the law and our Rules permit. If you are a joint shareholder, your holding will pass to the other joint shareholder(s) on your death, unless you complete the form below.

| | |
|--|--|
| Personal details of your nominee | |
| First name(s) in full | |
| Last name | |
| Address (if different from that supplied on application form overleaf) | |
| Postcode | |

I understand that it may not be possible for Beckley & Area Community Benefit Society Limited to action this request and I and my heirs will not hold the Society responsible for its actions. I understand that these instructions can only be revoked or amended by my giving clear written instructions to the Secretary of the Society at its Registered Office.

| | |
|--|------|
| Signed as a Deed | Date |
| Name in print | |
| Signature of Witness (Witness must not be the benefiting nominee) | Date |
| Name in print | |
| Address of Witness | |

Please send your completed form to:

Beckley & Area Community Benefit Society Ltd, c/o Moorleys, Woodperry Road, Beckley, OX3 9UY

Office use only

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