

all future correspondence

ROYAL AIR FORCE & DEFENCE FIRE SERVICE ASSOCIATION

Patron: Air Marshal Sir Roger Austin K.C.B. A.F.C. R.A.F. (Ret'd)



APPLICATION FOR MEMBERSHIP

Surname:	•••••••••••••••••••••••••••••••••••••••
First Name/s:	
Full Address:	
	Post Code:
Telephone Number:	Mobile Number:
E-Mail Address:	•••••••••••••
Service Number: D	Date of Discharge: Date of Birth:
•	Annual subscriptions are due on 1 September annually. However, if a reduced 'joining fee' of £10 will be sufficient to obtain membership
a Standing Order Mandate for £2	d method of payment is by Standing Order, and for your convenience 20 per annum is attached. Please return this form with your cheque/ FSA or completed Standing Order Mandate and Service History to:-
Dave Grant	
7 Cliff Road	
Spridlington Market Rasen	
Lincolnshire	
LN8 2DW	
I served in the RAF/DFS* From	: Until:
I do/do not* agree to my address/Pl the Association	hone Number being supplied to other members of
Signature:	Date:
NB. Please complete your service l	history and return it with this application.
Note:	
Upon Becoming a member, you wi	ill be granted a registration number; this number should be quoted on



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SERVICE HISTORY

Then this history sheet may help to Complete the details below (Give as	reunite you with the	m.	ith?		
Name: I	Rank or position:	•••••	Age:	•••••	
Date of Enlistment:	Date of	of discharge:			
Place of Fire training:	Inst	ructors name:			
Stations you served at:					
CAMP/UNIT		FRO)M	ТО	
Mates that you would like to mak	e contact (with Stat	ions and approx	dates)		
NAME	UNI	UNIT		DATES	

Comments:



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STANDING ORDER MANDATE

To:- The Bank or Building Society
Post Code
I request and authorise you to pay Barclays Bank PLC., Small Business Unit. First Floor, 28 Chesterton Road, Cambridge, CB4 3AZ. For the credit of:-
Royal Air Force & Defence Fire Service Association
Account Number 10622427
Sort Code 20-17-35
Commencing on, or immediately after the 1st September 2025, and thereafter on the 1st September each year, until you receive further notice from me/us in writing, the sum of £20:00, quoting a reference as follows:-
Membership Number (Ref)Surname:
First Names: and debit the following account accordingly.
Sort Code: Account Number:
Date: Signature:
If this mandate is being paid from a Building Society Account, or is being paid by someone else, please make sure that both your Name and Membership Number are quoted at all times, otherwise it will not be possible to credit your Membership Account.
Your Name:-
Your Address:

PLEASE RETURN ALL COMPLETED FORMS AND CHEQUE FOR FIRST YEARS MEMBERSHIP TO:-

Dave Grant 7 Cliff Road Spridlington Market Rasen Lincolnshire LN8 2DW