

Application to become a shareholder in: Leasingham Community Benefit Society Ltd.

One application form to be completed **per person**. *Completed application forms should be sent to: **Leasingham Community Benefit Society Ltd,**
c/o 51, St Johns Close, Leasingham, Lincs, NG34 8LU*

Or emailed to leasinghamcbs@gmail.com

Further copies can be downloaded from www.leasinghamcbs.com

PLEASE PRINT

Your name

Address

Email

Phone

I confirm that I am over 16 years of age *Please tick*

Only complete this section if purchasing shares on behalf of another person

(Please read Section b, pg. 7, 'How do I buy shares?')

Name shares to be issued in

Address

Email

Phone

If under 16 years please give date of birth/...../.....

Number of £50 **Shares** required **Amount** £.....

Note: minimum share purchase £50, maximum £20,000

Methods of payment:

BACS (Bankers Automated Clearing Services)

Leasingham Community Benefit Society Ltd

Barclays Bank Sort code **20 63 28** Account number **90246859**

Reference (Your FULL NAME)

Cheques made payable to: **Leasingham Community Benefit Society Ltd**

A remittance advice will be issued on successful receipt of payment

Please tick the appropriate boxes and date and sign as indicated

I understand and accept the terms of the share offer

I am an existing shareholder

Signed

Date/...../.....