60800 – GID Managers Registration Form Please complete this form clearly and ensure it is returned as soon as possible

Title:	Forename:				Surname:				D.O.B.	Dent	Dentist:	
Address						Start data: 01/ /			Pog foo: C20.00			
Address:					Start date:	01/ /		Reg fee: £30.00 Fee amount: £10.00				
					Category: Fee amount: £10.00							
Postcode:												
Email:												
Payment details	:					I						
Bank name:						Account name:						
Sort code:						Account number:						
Notes and exclusi	ons (office	use):							.		.	
DPAS AUTHORISATION: Please read and sign this DPAS Authorisation. It forms the basis of your agreement with DPAS that they will manage and administer your payments for you. The answers on this form contain your personal data. DPAS Limited (DPAS) records, processes and holds your personal data in accordance with data protection law. Your personal data will be used by DPAS, its group and its suppliers (for example providers of banking services) in the management and administration of your (GID Managers) membership and for no other purpose. I agree with DPAS that DPAS will manage and administer the payments to be made by me in respect of my GID Managers membership.												
Signature of payer:			Print nam	Print name:			Date:	Date:				
Instruction to your Bank or Building Society to pay by Direct Debit Image: Description of the WELLYNN Group Structure WELLYN GROUP STRUCTURE WELLYNN GRO												
						Instruction to v	our Bank o	r Building 9	Society:		60800	
Postcode: Name(s) of Account Holder(s):						Instruction to your Bank or Building Society: Please pay DPAS Limited Direct Debits from the account detailed in this Instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this Instruction may remain with DPAS Limited and, if so, details will be passed electronically to my Bank/Building Society.						
						Signature(s	s):		Date:			
Branch Sort Code						X						
Bank/Building So		unt number	r:]			FOR DPAS LIM This is not part Only sign abov	of the instr	uction to y	our bank or	building so	ciety.	

Banks and Building Societies may not accept Direct Debit instructions for some types of account.

60800-RF30118 CW-v0118

This guarantee should be detached and retained by the Payer.



The Direct Debit Guarantee

- This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits.
- If there are any changes to the amount, date or frequency of your Direct Debit DPAS Limited will notify you 5 working days in advance of your • account being debited or as otherwise agreed. If you request DPAS Limited to collect a payment, confirmation of the amount and date will be given to you at the time of the request.
- · If an error is made in the payment of your Direct Debit, by DPAS Limited or your bank or building society you are entitled to a full and immediate refund of the amount paid from your bank or building society.
 - If you receive a refund you are not entitled to, you must pay it back when DPAS Limited asks you to.
- · You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify us.