Westhall Community Pub Ltd SHARE APPLICATION FORM

If you wish to purchase shares in Westhall Community Pub Ltd ('WCP') and become a member of the Society, please complete the form below and return it to:

The Secretary, Westhall Community Pub Ltd, The Racehorse Inn, Mill Common, Westhall, Halesworth, Suffolk, IP19 8RQ



Name: (No joint applications)	
Address:	
	Postcode:
Phone number(s):	
Email address:	
For corporate bodi	es, provide details of a nominee:
	ch. The minimum investment is 1 share = £25. estment (including shares you already own) is 800 shares = £20,000.
Number of shares y	ou wish to purchase: Value of shares:
Tick the box if you	already own shares:
If you wish to nomi	nate a person to receive your shares upon your death please supply their details here:
Name:	
Address:	
Payment should be	made by cheque or direct bank transfer (tick as appropriate):
ched	ue enclosed (drawn on a UK bank) payable to "Westhall Community Pub Ltd"
	pay by direct bank transfer to WCP's bank account. For security reasons we will email our bank details once your application form has been received.
number of shares I will be used for the	orchase shares, I agree to my name, address, phone number(s), email address and the wish to purchase being held on a computer database. I understand that this information purpose of maintaining a register of members as required by the rules of WCP and for egarding the activities of WCP. This information will not be passed to third parties.
you on non-membe	r us to communicate with I confirm I am 18 years or older and that I have read the share prospectus: narketing etc.) please tick box:

Signature: Date: