**Liberty Music CIC Membership Form**

|  |  |
| --- | --- |
| Membership Number |  |
| Name |  |
| Date of Birth |  |
| Address |  |
| Phone Number |  |
| Email Address |  |
| Car Registration |  |
| Emergency contact |  |
| ID verified using | Driving licence/Passport/Biometric ID/Other photo ID |

**I agree to receiving marketing information and special offers by email: yes/no**

**I agree to receiving marketing information and special offers by text message: yes/no**

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