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	vou 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:	
	made either: rawn on a UK bank) payable to "Westhall Community Pub Ltd". OR k transfer to WCP's bank account (please contact us for details)
number of shares I will be used for 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.
	r us to communicate with you on non-membership ness matters, marketing etc.) please tick box:
	to confirm payment is enclosed I confirm I am 18 years or older and directly to our bank account: that I have read the share prospectus:

Signature: Date: