



You, and/or your family, regularly attend a Quaker Meeting or are in membership of the Society of Friends. In order for us to keep you and your family's details, which we will hold securely, we need your consent. Also, if you wish (and give further consent), we will publish these contact details in our next Scottish Book of Members and Attenders. To give consent, you need to complete the form below. This is to comply with the Data Protection Act 1998. When completed, this form should be kept by Overseers in your local Quaker Meeting.

Information that we hold is shared only with the Area Meeting Membership Clerk and specific people within your local Quaker Meeting, Scotland General Meeting and Britain Yearly Meeting. If you ask us to include your details in the Scottish book of Members and Attenders, others will obviously see your information. However the book is not available to the general public and is only sold within a Quaker context.

Please note: for the purposes of updating and publishing the book and its amendments, contact details may be transmitted electronically, but only between and to individuals already on the list, and under conditions of confidentiality to the book's printer. Children's dates of birth will not be published.

The Name of the Data Controller is:
General Meeting for Scotland of the Religious Society of Friends. (c/o GM Administrator).

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I / We do / do not (delete as appropriate) give consent to Quakers in Scotland keeping my/our name/s and other relevant information provided. I accept I can see, on request, all my/our information held.

I / We do / do not (delete as appropriate) give consent to Britain Yearly Meeting keeping my/our name/s and other relevant information provided. I accept I can see, on request, all my/our information held.

Additionally, I / We do / do not (delete as appropriate) give consent to Quakers in Scotland publishing in the Book of Members and Attenders, or the equivalent pdf list, my/our names and specified contact details as noted below.

Name 1: _____ Name 2: _____

Name 3: _____ Name 4: _____

Name 5: _____ Name 6: _____

Address: _____

_____ Post Code: _____

Tel No: _____ Mobile Phone No (optional) _____

Email address: _____

Signature (Adult) 1: _____ Date: _____

Signature (Adult) 2: _____ Date: _____

If person not present – I confirm I have telephoned /emailed the options as noted to the above named and they have given consent remotely.

Name of Person receiving consent: _____ of: _____ Meeting

Date of Telephone consent given: ____/____/____

Date & Reference of email consent: _____ (attach copy of email)