Application form



(please note you can also apply online at owainglyndwr.cymru)

•	worth of shares in The Owain Glyndwr er share. (minimum: £200, maximum: £50,000)
Forenames:	Surname:
Email address:	
Postal Address:	
Post code:	
Day-time Telephone:	
If you would like interest payments for please provide your bank details:	rom the Society to be made by bank transfer,
Name on bank account:	
Bank Account number:	Sort Code:

Contact us:

For all enquiries contact us via admin@owainglyndwr.cymru

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PAYMENT DETAILS	
I have instructed my bank to make a BACS transfer with the following	
reference (suggest initials & Date of Birth)	
I enclose cheque crossed payable to Corwen Partnership.	
Account name: Corwen Partnership	
Sort code: 40-18-14. Account number: 61378309	
Print and return the completed form to The Owain Glyndwr	
Community Hotel Limited, c/o Capel Bethesda, Mill Street,	
DECLARATIONS	
Please tick the boxes below to confirm your acceptance of the terms and conditions, and sign and date the form:	
I am over 16 and eligible to apply for shares. I have considered whether I need to take financial advice or other advice. I authorise the Society to make enquiries to confirm the eligibility of this application if required.	
I have read the Share Offer Document and Rules of the Society and I am not relying on any other source of information about this share offer.	
By requesting to purchase shares I agree to my details, provided above, to be held on a computer database. I understand this information will be used for the purpose of maintaining a register of members as required by the rules of the Owain Glyndwr Community Hotel Limited. This information will not be passed to third parties.	
Signature:	
Date:	

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If applying on behalf of an incorporated organisation please also provide: Organisation name: Type of organisation: Organisation address: Registration number: Registered with: Companies House / FCA Your Position within org.: (You must be authorised to sign on behalf of the organisation. Please supply notification of this appointment by the governing body with this application form) If you are buying shares on behalf of a child, please provide name, address and date of birth of the child below. Use a separate application form for each child. Ownership of the share will be transferred to them when they turn 16. Date of birth: Name of child: Address of child: **Signature of Adult Applicant:-**Contact us: For all enquiries contact us via admin@owainglyndwr.cymru