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# APPLICATION FOR SHARES IN COMMUNITY WELLINGTON INN (HEREFORDSHIRE) LIMITED.

<b>First Applicant</b>	<b>Joint Applicant</b> (the first applicant will be listed on the members' register and will hold the voting rights)
<b>NAME</b> (In full)	<b>NAME</b> (In full)
<b>COMPANY OR ORGANISATION</b> (If applying behalf of a group or incorporated body)	<b>COMPANY OR ORGANISATION</b> (If applying behalf of a group or incorporated body)
<b>ADDRESS</b>	<b>ADDRESS</b>
<b>POST CODE</b>	<b>POST CODE</b>
<b>CONTACT PHONE NUMBER</b>	<b>CONTACT PHONE NUMBER</b>
<b>EMAIL</b>	<b>EMAIL</b>

I wish to become a member of Community Wellington Inn (Herefordshire) Limited in accordance with the rules and wish to apply for:

<b>Number of Shares (£50 per share):</b>	No.....
<b>Amount in £:</b>	£.....

NB: The minimum investment is £50 or 1 share. The maximum permitted investment is £40,000.

**Please tick the boxes to indicate that you agree with the following statements:**

- ☐ I confirm that I am over 18 years of age
- ☐ I have read the Share Offer Prospectus and agree to be bound by the Terms and Conditions of the Share Offer and the Rules of the Society (see [www.wellingtonpub.org/documents](http://www.wellingtonpub.org/documents) )
- ☐ I consent to receiving formal notices and links to documents on the Society's website by email to the address above
- ☐ I understand that the Management Committee of the Community Wellington Inn (Herefordshire) Limited may reject my application and are not obliged to tell me why it has been rejected.

***I confirm that I wish to invest the amount described in this application. I acknowledge that, by signing, I am making a legally binding commitment.***

<b>Signature(s)</b> All applicants to sign	<b>Date</b>
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## Method of Payment: On Line Bank transfer

For **online bank transfers** please use a reference identifier generated as follows-

First character of first name (e.g. M for Mary)	M							
First 3 characters of surname (e.g. MIL for Miller)	M	M	I	L				
Day and month of birth in 2 digit form (e.g. 01 05 for 1st May)	M	M	I	L	0	1	0	5

***Please write this identifier at the top of this form, and quote it in your BACS payment***

- ☐ I have paid by online bank transfer to : Lloyds Bank Account No. 74089268 Sort Code 30-96-26

## Method of Payment: Cheque

- ☐ I enclose a cheque made payable to Community Wellington Inn (Herefordshire) Ltd

**Please return your completed application form at latest by 4 September 2021, to:**

**The Secretary, Community Wellington Inn (Herefordshire) Ltd, Southbank, Wellington, HR4 8AT**

## COMMUNITY WELLINGTON INN (HEREFORDSHIRE) LIMITED

### HOLDING SHARES ON BEHALF OF CHILDREN AND NOMINATION OF SHARES ON DEATH

If you are investing in shares in the Community Wellington Inn (Herefordshire) Limited you can choose to:

- Hold shares on behalf of children and/or
- Nominate a person to whom you wish your shares to be transferred on your death.

Please fill in the relevant sections below:

### HOLDING SHARES ON BEHALF OF CHILDREN

If you wish to hold shares on behalf of someone who is under 18, please fill in that person's details below.

<b>First Name(s)</b> in full	<b>Address</b>
<b>Last Name</b>	
<b>Date of Birth</b>	
<b>Post Code</b>	

### NOMINATION OF SHARES ON YOUR DEATH

You can nominate a person aged 18 or over to whom you wish your shares to be transferred on your death. Community Wellington Inn (Herefordshire) Limited will respect your wish in so far as the law and our Rules permit. If you are a joint shareholder, your holding will pass to the other joint shareholder(s) on your death, unless you complete the form below.

#### Personal details of your beneficiary:

<b>First Name(s)</b> in full	<b>Address</b>
<b>Last Name</b>	
<b>Date of Birth</b>	
<b>Post Code</b>	

I understand that it may not be possible for Community Wellington Inn (Herefordshire) Limited to action this request and I and my executors will not hold the Society responsible for its actions. I understand that these instructions can only be revoked or amended by my giving clear written instructions to the Secretary of the Society at its Registered Office

<b>Signature(s)</b> All applicants to sign	<b>Date</b>
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The offer closes on 4 September 2021 unless the Management Committee exercises its right to extend the offer if necessary.

Please send your completed form to: The Secretary, Community Wellington Inn (Herefordshire) Ltd, Southbank, Wellington HR4 8AT or hand it in at a launch event.

Payments by bank transfer will be held securely on deposit and cheques will not be banked until the minimum target (£250,000) for the offer is achieved. The offer closes on 4 September 2021 unless the Management Committee exercises its right to extend the offer if necessary.

By requesting that I become an investing member of the Community Wellington Inn (Herefordshire) Ltd. I agree to my name, address, phone number(s), email address and the number of shares I wish to purchase being stored securely on a computer database. I understand that this information will be used for the purpose of maintaining a register of members and potential members as required by the rules of the Community Benefit Society, for the posting of notices regarding the activities of the Community Benefit Society and will not be passed to third parties without my permission, except as required by law.

The Community Wellington Inn (Herefordshire) Limited is registered with the Financial Conduct Authority under the Co-operative and Community Benefit Societies Act 2014 as a Community Benefit Society – registration number 8641.