

# APPLICATION FOR SHARES IN THE FOX INN RYTON COMMUNITY PUB LIMITED.

Please either complete this application form or apply online at: [www.the-fox-at-ryton.co.uk](http://www.the-fox-at-ryton.co.uk)

Applicant	Joint Applicant* (if applicable)
NAME (In full)	NAME (In full)
ADDRESS	ADDRESS
POST CODE	POST CODE
COUNTRY	COUNTRY
CONTACT NUMBER	CONTACT NUMBER
EMAIL	EMAIL
COMPANY OR ORGANISATION (If applying on behalf of a group or incorporated body)	

\*the first applicant will be listed on the members' register and will hold the voting rights

I wish to become a member of The Fox Inn Ryton Community Pub Limited in accordance with the rules and apply for:

Amount to invest (minimum £250, maximum £25,000 in multiples of £250)	
Amount in £:	
Please tick this box if you would like to claim tax relief, and wish to receive a SEIS3 claim certificate	

I confirm that I am over 18 years of age and that I have read and understood the Share Offer document available at [www.the-fox-at-ryton-co.uk](http://www.the-fox-at-ryton-co.uk). I confirm that I wish to invest the amount stated in this application and I acknowledge that, by signing, I am making a legally binding commitment.

Signature(s)	Date
All applicants to sign	

Please return your completed application form as soon as possible, and by 30 April 2025 latest, to:

- Scan and email to: [rytonvillagecommunitygroup@gmail.com](mailto:rytonvillagecommunitygroup@gmail.com)
- Complete online at: [www.the-fox-at-ryton.co.uk](http://www.the-fox-at-ryton.co.uk)
- Post to Helen May, Wisteria House, Ryton, Dorrington, Shropshire SY5 7LS

Method of Payment:

I have paid by online bank transfer to: (*initials and surname as a reference on your payment*)

The Fox Inn Ryton Community Pub Limited  
Co-operative Bank  
Sort code: 08-92-99  
Account: 67291386

Or/ I enclose a cheque made payable 'The Fox Inn Ryton Community Pub Limited'

Payments by bank transfer will be held securely on deposit and cheques will not be banked until the minimum target for the offer is achieved. The offer closes on 30 April 2025 unless the Management Committee exercises its right to extend the offer if necessary.

## HOLDING AS A GIFT AND NOMINATION OF SHARES ON DEATH

You can optionally choose to:

- Buy shares on behalf of another person, including a child (under 18 years of age)
- Nominate a person to whom you wish your shares to be transferred on your death.

Please fill in the relevant sections below:

### PURCHASING SHARES FOR SOMEONE ELSE

If you wish to hold shares on behalf of someone else eg a friend or relative, please fill in that person's details below.

<b>First Name(s)</b>	<b>Address</b>	
<b>Last Name</b>		<b>Post Code</b>
<b>Date of Birth</b> (if under 18 years of age)		

### NOMINATION OF SHARES ON YOUR DEATH

You can nominate a person who is over 18 years of age to whom you wish your shares (up to a value of £5,000) to be transferred on your death. The Fox Inn Ryton Community Pub 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>	<b>Address</b>	
<b>Last Name</b>		<b>Post Code</b>
<b>Date of Birth</b>		

I understand that it may not be possible for The Fox Inn Ryton Community Pub 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</b>	<b>Date</b>
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**This share offer closes on 30 April 2025 unless the Management Committee exercises its right to extend the offer if necessary or close it if the maximum target is achieved earlier.**

By requesting that I become an investing member of The Fox Inn Ryton Community Pub Limited. 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. Refer to our [website](#) for our data protection policy. 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 the Society and will not be passed to third parties without your permission, except as required by law.