Relatives Contact Form

We are compiling records of all who served at RAF Metheringham and seek assistance from their surviving relatives.  If you can help, please add as much detail as possible to this form. Please return it to one of our Duty Stewards onsite or return by email if contact was made online.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name of Service person |  | | | |
| Trade |  | Rank |  | |
| Aircraft code / serial no.  (if known): |  | Service Number (if Known) |  | |
| Dates of Service |  | | | |
| Names of crew served with |  | | | |
| Any other information  Decorations/medals  (add as much detail as you know and continue on the back page if necessary) |  | | | |
| **Your Contact Details** | | | | |
| Name |  | | | |
| Address |  | | | |
| Phone number |  | | | |
| Email address |  | | | |
| Relationship to Service person |  | | | |
| I am happy to be contacted by one of our research team. | | | Yes | No |
| I wish to be added to the 106 Sqn Families Association Contact List. | | | Yes | No |
| I would like to be put in touch with other ‘families’ and give my consent to do so. | | | Yes | No |
| I am happy for the story of my relative to be used for publicity and marketing purposes. | | | Yes | No |

**Metheringham Airfield Visitor Centre takes your privacy seriously This form should only be completed by the relatives of the person concerned and if you are not a relative, you need to provide written consent for its completion. We confirm that we will not pass your details onto any third parties, or use them for any other purposes, without your direct consent.**

Signature of relative: ………………………………………Date of completion: …………………………..

Received by: …………………………………………… Date Received: ……………………………….

Action taken by Research Team ……………………………Date Replied if needed: ……………………..