

U3A MEMBERSHIP APPLICATION FORM
(Please print)



Name in full: Mr /Mrs /Ms

Address:

.....

.....Postcode:

Telephone:.....

E-mail:

If you are already a member of a U3A branch – please complete below:

Branch title:Renewal Date:.....

**I agree to my personal details being held on a restricted database, for use by
Seaton U3A committee members and group leaders only.**

Signed:..... Date:.....

PAID Cash:..... Cheque:..... Standing Order:.....



.....:

STANDING ORDER

To.....Bank plc

Address.....

Account numberSort Code.....

Please pay to Lloyds Bank plc, PO Box 1000, BX1 1LT Branch (77 63 17)

for the credit of U3A SEATON, A/C no. 73764768

The sum of £.....(pounds)

On the (day / month / year).....

And thereafter annually until further notice.

Name

Signature.....**Date**.....