

## MEMBERSHIP APPLICATION FORM

Please complete the following information. Fields in **Bold** are mandatory

About yourself										
Title		Forename/s			Surname					
Email								Kı	nown as	
Mobile	e Emerge			ergency o	contact					
Tic	Tick if you pay UK tax and are willing for us to claim Gift Aid on this and future subscription (if applicable)									
About your partner/spouse (Joint membership only)										
Title		Forename/s		Sur			Surname			
Email							Kı	nown as		
Mobile			contact							
Your Address										
No/Name Street										
Additional lines										
Town	n			County			Post Code	•		
Teleph	one									
Signed. (For joint membership both members should sign the form)										
You Your Partner										
Payment										
Subscription enclosed (please tick as appropriate)  Individual £6.00  Joint £12.									Joint £12.00	

Please make your cheque payable to **THORNBURY U3A** and return it together with this form to Pat Light, 63 Wolfridge Ride, Alveston, BS35 3PR

The data you provide will be held electronically by Thornbury U3A to facilitate your membership.

If you have any concerns, please contact the Membership Secretary on membership@thornburyu3a.org.uk

The provision of an email address will assist us in transmitting any information necessary so please consider this when completing this form.

Your data will not be passed onto any third party and will only be for membership use.

For Membership Secretary's use only Membership Nrs WM Invitation Welcome letter Newsletter Date Date Date