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| **The Friends of Bruchsal Society**  **Membership Application Form**  **2024 – 2025** |

Membership covers the period from April 1st to 31st March. Please place a ‘x’ against the membership you are applying.

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|  | £10 | **Group Membership** |
|  | Group Name:  Type of Group: Age Range: Number of Employees:  Address:  Contact Name: Contact Number:  Email Address: | |

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|  | £10 | **Family Membership (2 adults, 2 children under 16 – additional children £1.00 each)** | | | |
|  | £5 | **Individual Membership** | | | |
|  | £3 | **Senior Citizen / Unwaged** | | | |
| Adult 1 | | | Mr / Mrs / Ms | |  |
| Adult 2 | | | Mr / Mrs / Ms | |  |
| Child 1 | | |  | | |
| Child 2 | | |  | | |
| Child 3 | | |  | | |
| Address, including postcode | | | |  | |
| Telephone number | | | |  | |
| Email address | | | |  | |

Do you give permission for the organisation/club/family name to be used to promote the Friends of Bruchsal? YES / NO

Club / I / we, apply to join / renew, my / our membership and enclose a cheque/cash to the value of £………………., (please make cheques made payable to “***The Friends of Bruchsal Society***” and put the name of the group/organisation or family surname and postcode on the reverse of the cheque, to allow us to recognise your payment) alternatively, for bank transfer details contact Tim Kretschmer at the email below.

Return your completed form and cheque to The Treasurer – Tim Kretschmer

The Friends of Bruchsal Society

Bryn Heulog, Crown Road

Llanfrechfa

Cwmbran, Torfaen, NP44 8UE

Or email: [treasurer@friendsofbruchsal.co.uk](mailto:treasurer@friendsofbruchsal.co.uk)

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| For office use only  ……………. /…..……….. Cheque no………………………………… / Cash value …………………………………  Signature:………………………………….………………………………..…… Date: ………………………………… |