

# FRIENDS OF GOLOWAN

## APPLICATION FOR MEMBERSHIP

I / we wish to apply for membership of the Friends of Golowan.

PLEASE USE BLOCK CAPITALS Mr  Mrs  Miss  Ms  Other  (please state) \_\_\_\_\_

Surname 1 \_\_\_\_\_ Surname 2 \_\_\_\_\_

First name(s) \_\_\_\_\_ First name(s) \_\_\_\_\_

Address

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Post Code \_\_\_\_\_

Telephone No(s). \_\_\_\_\_

E-Mail address \_\_\_\_\_

I wish to pay the annual subscription for a:

SINGLE membership (£12)

DOUBLE membership (Two members at same address) (£20)

I have enclosed a CHEQUE  (made payable to Friends of Golowan)

I have arranged BACS transfer

I have arranged a standing order

*Our details for BACS or Standing Order:*

*Sort Code 60-16-22, account number 76119432; please use your surname as reference.*

Signed \_\_\_\_\_ Date \_\_\_\_\_

*Please post your form and cheque, if applicable, to:*

*FoG Membership, 10 Treassowe Road, Penzance, TR18 2AU*

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For FOG use :

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