CAPEL HORTICULTURAL SOCIETY

MEMBERSHIP APPLICATION

APPLICANT INFORMATION

Name:		
Title:	Phone:	Mobile:
Current address:		
Postcode:		
Email:		

PARTNER INFORMATION IF JOINT MEMBERSHIP

Name:		
Title:	Phone:	Mobile:
Email:		

CHILDREN IF MEMBERSHIP PRIVILEGES DESIRED

Name:	Name:
Date of birth:	Date of birth:
Name:	Name:
Date of birth:	Date of birth:

SIGNATURES

Signature of applicant:	Date:
Signature of partner: (Only if joint member)	Date:

Single adult membership is £5.00 per annum
Joint membership (two adults at the same address) £8.00 per annum
Children 15 and under free
An annual membership runs from 1 January to 31 December

Pay by cheque, standing order or bank transfer (using your surname as the reference)
Capel Horticultural Society Sort code: 09-01-55 Account: 52542601
Mail form to: CHS Membership Secretary,
60 The Street, Capel RH5 5LE