



MEMBERSHIP APPLICATION FORM

Registered Charity Number:1102469

Please complete and return this form with your membership fee to:

The Membership Secretary, 'The Trees Community Association', c/o Willingdon Trees Community Centre, Holly Place, Eastbourne, East Sussex, BN22 0UT.

First Application

Membership Renewal

| CODE | | | | |
|------|---|------------|---------|---|
| | U | Affiliated | £ 5.00 | Lives outside of Willingdon Trees, does not have voting rights and is unable to sit on committee. |
| | V | Group | £ 20.00 | To be represented by at least one person at committee meetings. |
| | X | Family | £ 10.00 | All residents of given address. |
| | Y | Reduced | £ 2.50 | Senior citizens, students, receipt of benefits etc. |
| | Z | Adult | £ 5.00 | Individual membership. |

PLEASE PRINT THE FOLLOWING DETAILS IN CAPITAL LETTERS

| | |
|------|--|
| Name | |
|------|--|

| | |
|---------|--|
| Address | |
| | |

| | | | |
|----------|--|----------------|--|
| Postcode | | Contact number | |
|----------|--|----------------|--|

NAMES OF APPLICANTS TO BE INCLUDED IN FAMILY MEMBERSHIP AT THE ABOVE ADDRESS

| | |
|---|--|
| 1 | |
|---|--|

| | |
|---|--|
| 2 | |
|---|--|

| | |
|---|--|
| 3 | |
|---|--|

| | | | |
|------------------------|--|------|--|
| Signature of applicant | | Date | |
|------------------------|--|------|--|



FOR GROUPS AND SECTIONS

| | |
|------------|--|
| Group Name | |
|------------|--|

| | |
|--------------------------------|--|
| Representative Contact Details | |
|--------------------------------|--|

| | | | |
|-----------------------------|--|------|--|
| Signature of Representative | | Date | |
|-----------------------------|--|------|--|

Cheques should be made payable to: **'The Trees Community Association'** and returned with this form.

In accordance with the Data Protection Act 1998 this information will be filed securely by the Trees Community Association for membership purposes only and not passed on to any other organisation.

For office use only:

| | |
|-----------------|----------------|
| MEMBERSHIP CODE | () TCAM _____ |
|-----------------|----------------|

| | |
|----------|---------|
| FEE PAID | £ _____ |
|----------|---------|

| | |
|---------------|------------------|
| DATE ACCEPTED | ____ / ____ / 20 |
|---------------|------------------|

| | |
|---------|------------------|
| EXPIRES | ____ / ____ / 20 |
|---------|------------------|