



Membership Application Form

I wish to join Inspieration, Friends of Boscombe Pier and agree to abide by the Constitution

Surname Mr / Mrs / Miss / Ms (delete as appropriate)
First Names Class of Membership
Address (please circle as appropriate)
..... Full Single £3.00
..... Full Joint £4.00
..... Post Code Full Family £5.00
Telephone No Organisation £5.00
Email Address

I enclose £ as membership fees Date

I enclose £ as a donation to Inspieration, Friends of Boscombe Pier

This information will remain confidential and will not be passed on or shared with any other parties.

Please make cheques payable to: **Inspieration, Friends of Boscombe Pier**

If posting, please return to:

Inspieration, Friends of Boscombe Pier, 31 Swanmore Road, Bournemouth, BH7 6PB

Signature

For official use only: Cheque Cash

Membership No