



Swiss Cottage Community Centre Annual Membership Form

(Please Write in Block Capitals)

Name: _____

Address: _____

Postcode: _____ Date: _____

Email: _____

Mobile No.: _____

Home Tel. No.: _____

Group Name: _____

Group Code: _____

Which group are you attending? _____

Is this the only group you are attending? Yes No

If No, what is/are the name(s) of the other groups? _____

		Amount Paid (please circle)
Membership Type:	Un Waged	£5.00
	Waged	£10.00
	Registered Charity	£20.00
	Business	£50.00
	Donation (if any)	
	Total:	

For Office Use Only:

Membership Begins on:

Membership Ends on:

Membership Number:

Card Given to Member: Yes No