

THE ASHOVER LIGHT RAILWAY SOCIETY

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MEMBERSHIP APPLICATION FORM

I/we would like to apply for membership of The Ashover Light Railway Society.

NAME (ADULTS):

.....

UNDER 18s: DOB / /

..... DOB / /

..... DOB / /

ADDRESS:

.....

..... POSTCODE:

PHONE:

E-MAIL:

MEMBERSHIP TYPE: £

DONATIONS: £

TOTAL ENCLOSED: £ MANY THANKS

SIGNATURE(S):

.....

DATE:

*PLEASE SEND THE COMPLETED FORM, TOGETHER WITH A CHEQUE OR POSTAL ORDER
PAYABLE TO 'THE ASHOVER LIGHT RAILWAY SOCIETY' TO:*

THE MEMBERSHIP SECRETARY
C. M. HOPE
5 GLENBARR DRIVE
HINCKLEY
LEICESTERSHIRE
LE10 OUT