



MEMBERSHIP FORM

Please use block capitals for your NAME and ADDRESS and *please write your e-mail address clearly.*

FORENAME/SURNAME: (Mr/Mrs/Miss/etc)	_____
ADDRESS:	_____ _____ _____
	POST CODE:
COUNTRY:	_____
Telephone: (optional)	_____ (mobile/home/work)
E-mail address:	_____ @ _____

The Membership period covered is to 31st March 2010

Single Membership: Yes/No £____ (£10 per annum)

Joint/Family Membership Yes/No £____ (£15 per annum)

Donation (if applicable): £____

Total: £____

Sterling cheques should be made payable to the **Friends of Northwood Cemetery**

I / we wish to become a Friend of Northwood Cemetery and my / our subscription will be paid by Cheque / Cash (*please delete as appropriate*)

Signed: _____

Date: / / 2009

My primary interest in joining the Friends of Northwood Cemetery is:

When completed, please return this form to:

**Mr Jon Matthews
Membership Secretary
Friends of Northwood Cemetery
Dove Cottage
23 St Andrews Street
Cowes
Isle of Wight
PO31 7DF**

Telephone: 01983 247498

www.friendsofnorthwoodcemetery.org.uk

Please note that personal information supplied on this form will be held in a computer database and will only be used for administration purposes.