



The Friends of Minack Society

Membership Application

www.friendsofminack.org

First applicant details			Membership Number: <input type="text"/> (Office use)
First Name		Surname	
Date of birth:	-- / -- / ----	Telephone Number:	
Current Address:			
City:		State/County :	
ZIP or Postcode:		Email address:	
Type of membership required. Please circle.	Adult £8.00 (GBP)	Couple £12.00 (GBP)	Under 18 £4.00 (GBP)
	Life £50 (GBP)	Donation £	(Please state in GBP)
Where did you find out about the Society	Word of mouth / Internet search/ Publication / Other ~ please state		
Signature of applicant:			Date:

Second applicant details			Membership Number: <input type="text"/> (Office use)
First Name		Surname	
Date of birth:	-- / -- / ----	Telephone Number:	
Current Address:			
City:		State/County :	
ZIP or Postcode:		Email address:	
Type of membership required. Please circle.	Adult £8.00 (GBP)	Couple £12.00 (GBP)	Under 18 £4.00 (GBP)
	Life £50 (GBP)	Donation £	(Please state in GBP)
Where did you find out about the Society	Word of mouth / Internet search/ Publication / Other ~ please state		
Signature of applicant:			Date:

Do you wish to receive a Book list

YES / No

Do you wish to receive an items for sale list?

YES / NO

Please complete and return to:

**Mrs O. M. Ackroyd,
Membership Secretary
Little Manor, Long Garth, Whitesmocks, Durham City. DH1 4HJ
Northumberland, England United Kingdom**