

Lymington & District International Twinning Association

MEMBERSHIP APPLICATION

Annual Membership Fee: Individual + children (under 18) £25 Couple + children (under 18) £50

(Half fees apply when joining March -June)

Please complete this application form and send to litasec61@gmail.com. Please make your payment by bank transfer to: Lymington International Twinning Association, Sort Code: 40-30-36, Account Number: 11167677 Please include your SURNAME as a reference. Alternatively you can send a cheque, made payable to LITA, to the Membership Secretary: Simon Hacking, 11 Oakenbrow, Sway, Lymington, Hants SO41 6DY

Name: Mr/Mrs/Ms		
Name: Mr/Mrs/Ms		
Names of children:		
Address:		
Post code: Telephone: Area code:		
Email:		
<i>N.B.</i> Your <i>name and phone number</i> will be added to a list that is circulat <i>included</i> on this list, please cross here	ed to other membe	rs. If you <i>do not want to be</i>
We will only use the information for the expressed purposes of the Associo will remove members' details from our records when they leave the Associ		em to any third party, and we
Newsletters, information, booking forms, etc. are sent out by email If you <i>do not have an email account</i> and must receive information b		
Please let us know how you heard about our organisation:		
Which country(ies) are you interested in visiting w	ith LITA/hosting visit	tors from?
Name Germany	France	Spain
Name Germany	France	Spain
Name Germany	France	Spain

Signature:

Date: