



BEAULIEU TWINNING ASSOCIATION MEMBERSHIP APPLICATION FORM

Single Membership£10 Couple or Family Membership.....£15

Title.....First Name.....Surname.....

Title.....First Name.....Surname.....

Children's names and ages (under 18).....

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Address.....

.....

.....Postcode.....

Home/Mobile Phone Number.....

Email address.....

French spoken?.....

Could you accommodate any guests? If so, how many?.....

Any other information which could be useful.....

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I/We give consent for our personal information to be held by the Beaulieu Twinning Association for the purpose of the running of the Association, provided the Association complies with the GDPR regulations.

Signed.....Date.....

Please return to the Secretary: Mrs Dilys Rich, Kings Copse House, Kings Copse Road, Blackfield, Hants SO45 1XF Tel: 02380 893138 dilysmackinnonrich@gmail.com