

Membership Form

1st April 2010 to 31st March 2011



PLEASE COMPLETE IN BLOCK CAPITALS

Name of Group/Individual Member:

A) Group/Setting Address:

..... Post Code:

Group Contact Name (at setting): Position:

Telephone number (at setting): Email address:

B) Contact Name: Position:

(contact name B should be a committee member, manager, proprietor)

Address:

..... Post Code:

Tel: Email address:

BBUFA NEWSLETTER should be sent to (circle your choice): A or B

Alternative address for the newsletter (ie if you would prefer post not to go to the setting address)

Address:

.....Post Code:

GROUP OPENING TIMES:

Am

Mon..... Tues..... Wed..... Thurs..... Fri

Pm

Mon..... Tues..... Wed..... Thurs..... Fri

PLEASE TICK THE TYPE OF MEMBERSHIP YOU ARE APPLYING FOR:

- Playgroup/Pre-School @ £60
- Full day care @ £60
- Individual member @ £15
- Associate membership i.e. childminders, family groups @ £15

PLEASE MAKE CHEQUES PAYABLE TO: **Bexhill & Battle Under Fives Association Ltd**

LW/B014E

Please turn over.....

If you are happy with the information you have provided on this form, please would you sign it so that we have your approval to hold this information on file and on the BBUFA database.

Your signature: **date:**

Your completion of this form will give us your permission to contact you about available services and those being developed by BBUFA.

Please return this form to:
Leanne Walker, BBUFA Administrator, c/o 23 Cranston Avenue, Bexhill-on-Sea, East Sussex, TN39 3QG
Telephone: 01424 733067
email: leanne@bbufa.org.uk