

SOLENT AMATEUR ASTRONOMERS

FORM A - MEMBERSHIP RENEWAL FORM

Membership required - please tick or cross the applicable category and fee payable.

Family	Single	Reduced Single	Life	Affiliation
£35.00	£28.00	£21.00	£280.00	POA
Group Name (Affiliation only):			Number (Family only):	
Surname:		Forename:		DOB:
Surname:		Forename:		DOB:
Surname:		Forename:		DOB:
Surname:		Forename:		DOB:
Surname:		Forename:		DOB:
Address:				
Postcode:			Phone:	
E-mail:				

I / We*, the undersigned, apply for renewal of membership. I / We* do hereby agree that as a member / as members of Solent Amateur Astronomers, I / We* will be governed by their Constitution as it is now formed or as it hereafter be altered. Provided that I / We* will indicate in writing to the Committee that I / We* wish to withdraw from membership, I / We* will be free of this obligation. (*Delete where applicable.)

Personal details will be held electronically and securely and will only be used for the purpose of membership administration.

Signature:

Date:

Please send this renewal form together with your payment to the Membership Secretary:
Mrs S. Oakley. 114 Ticonderoga Gardens, Woolston, Southampton. SO19 9HD
(Please make cheques payable to "Solent Amateur Astronomers")

or

Completed and signed renewal forms can be sent via email to suzanne_oakley@sky.com and payment may be made by bank transfer to: Solent Amateur Astronomers: Sort code 404639 Account 21571818.

Please use your name as the Reference so that the payment can be identified.