**Alford Heritage Museum 2020 Membership Application Form**

|  |
| --- |
| Name |
| Address |
|  |
|  | Postcode: |
| Tel: | E Mail: |
| Membership Type | Single £12 | Joint £ 20 | Family £25 |
| I do not require a membership card Please post my membership card to me **Please tick which you prefer** |
| I will be happy to have my contact details stored in the museum database. This information will not be shared with any other organisation |
| I will be happy to receive information on events and offers from Alford Heritage Museum |
| Signature |
|