

**North Hertfordshire and Stevenage Branch**

**NEW/RENEWAL MEMBERSHIP APPLICATION**

Subscriptions are for one year, commencing 1 January, expiring 31 December each year

Membership Secretary: Pat Tewkesbury, who this form should be returned to, or any queries raised\*

**Your details**

Title.....First name.....Last name.....

Title.....First name.....Last name.....

Address.....

.....Post Code.....

Telephone.....Mobile.....Email

**Emergency contact details**

Emergency contact (1).....Relationship (e.g. spouse, son/daughter/friend).....  
*Their contact details*

Telephone.....Mobile.....Email

Emergency contact (2).....Relationship (e.g. spouse, son/daughter/friend).....  
*Their contact details*

Telephone.....Mobile.....Email

**The Small Print**

Membership of the Branch is dependent upon membership of Parkinson's UK.

Enclosed is a subscription of £4 for each individual on this form. Total £.....

\*Please make cheques payable to Parkinson's UK North Hertfordshire and Stevenage Branch then post your completed form with cheque, to the Membership Secretary, Pat Tewkesbury, 267 York Road, Stevenage, Herts. SG1 4HD. Mobile 07768 128368  
Or alternatively hand in with a cheque or cash at the reception desk at a branch meeting.

It is understood and agreed that the above information is being held on computer for the purpose of administration of the Branch.

It is also understood that this information will not be given to any third party for any purpose.

Signature.....Signature.....

Membership no.....Date.....Membership no.....Date.....  
(Refers to National Membership).....(Refers to National Membership)

**For Committee use**

Membership form and payment received on.....Receipt number.....refers