

RSPB Bolton Local Group - Valid from 1st September 2018 until 31st August 2019

Title First Name Surname(s) Type of membership required (please tick)

Single Membership @ £5.00 _____

Address _____ Two Members at same address @ £8.00 _____

Postcode _____ Tel _____

Full Member of RSPB Local Group (must be members of the National RSPB)

Associate Member (will pay full entrance fee at evening meetings) Please tick appropriate box.

New Local Member? Yes/No _____ If Yes where did you hear about our Group? _____

I enclose my remittance of £ _____ (along with a donation of £ _____) Total = £ _____

The RSPB Bolton Local Group would like to keep your details to send you further information about Group activities and the work of the RSPB.

If you would prefer us not to use your details in this way please tick here The RSPB Bolton Local Group promise not to sell your details to anyone else.

Signature _____ Date _____ Your national RSPB membership No: _____

Please return this form along with your remittance made payable to RSPB Bolton Local Group to
Mrs. Cheryl Delaney, 9 Balmoral Road, Clifton, Swinton, Manchester, M27 8GF

If you would prefer to receive your twice yearly
newsletter by e-mail please add your e-mail address _____