



MEMBERSHIP APPLICATION FORM

I wish to join the Founder Friends of the New Wimbledon Theatre

Annual Membership Fee £17

(Please use BLOCK LETTERS)

TITLE (Mr/Mrs/Miss/Ms)

FIRST NAME _____

SURNAME _____

ADDRESS _____

POST CODE _____

MOBILE NO _____

EMAIL _____

WOULD YOU BE INTERESTED IN JOINING THE COMMITTEE YES _____ NO _____

Please make a cheque payable to FFNWT and send together with this form and a **STAMPED ADDRESSED ENVELOPE** to:

The Membership Secretary, 137 Poplar Road South, Merton Park, London SW19 3JZ

OR

Make an online bank transfer to Sort Code 30-99-15 Account No 27819568

Account Name: Founder Friends of New Wimbledon Theatre (FFNWT) and use your surname as reference.

Please email: david.coyte2007@btinternet.com and joyceclay137@btinternet.com to confirm this transaction.