

LYME REGIS/BARFLEUR TWINNING ASSOCIATION

MEMBERSHIP FORM 2011

Please complete address, telephone number and accommodation available plus the type of membership you would like

Address (to be completed by all applicants):	Tel No.:
	E-Mail: please write clearly

ACCOMMODATION

If you are prepared to provide accommodation for French visitors please indicate the number of ROOMS you have (eg 1 double and 1 twin will mean you have four beds to offer, 2 singles will mean 2 beds to offer)

DOUBLE BEDROOMS	TWIN BEDROOMS	SINGLE BEDROOMS	OTHER
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SURNAME	FIRST NAME	AGE	How do you rate your French speaking ability? 1 = very good 2 = good 3 = a little 4 = none	FRENCH ABILITY

FAMILY MEMBERSHIP (2 Adults + children) **£15 p.a.**

INDIVIDUAL ADULT MEMBERSHIP **£10 p.a.**

Please make cheques payable to "Lyme Regis/Barfleur Twinning Association" and forward together with your membership form to Mike Lewis, Town Council Offices, Church Street, Lyme Regis, Dorset DT7 3BS.

Data Protection Policy Statement

The personal information submitted via this form will only be used for the purposes of administering the Lyme Regis/Barfleur Twinning Association and communicating with its members. The data will be held in a locked filing cabinet within the offices of Lyme Regis Town Council accessible to the Secretary of the Association.

Please indicate whether you are willing for these details to be available to other members of the Association. YES/NO

Signature

Date