

U3A Ellesmere Incorporated

Application for membership

Personal details		
Name:		
Email:		
Address	: :	
Dhono	Hamai	
Phone	Home:	
	Mobile:	
Date:		
I will pa	y by: ct credit to our acco Please ensure you i	ount 03-0767-0001025-00. Include your name in the reference field.
	•	ellesmere@gmail.com, or hly meeting.
Paymen	nt received with app	lication □ Cash.
Date re	ceipt issued:	Receipt number:
	tered in the ership register:	