



**The Friends of Chertsey Museum**  
Registered Charity No 1075200  
**Membership Application**

**Name** .....

**Address** .....

.....

**Postcode** .....      **Tel No** .....

For a Family Membership please add the names of other members and ages of children under 16

**Names** .....

.....

.....

I/We apply for membership of The Friends of Chertsey Museum.

I/We enclose a cheque made payable to **The Friends of Chertsey Museum** for £

I want The Friends of Chertsey Museum from the date of this application to treat as Gift Aid donations all payments I make in respect of membership subscriptions.\*

\*(Please delete if you do not pay income tax or capital gains tax, or if it is a business subscription.)

**Signed** .....

**Date** .....

Please return this form to:  
The Membership Secretary  
The Friends of Chertsey Museum  
The Cedars  
33 Windsor Street  
Chertsey, Surrey KT16 8AT