



LPBIWC Membership Application Form

(Please fill out in **CAPITAL** letters)

Surname :

First Name :

Street Address :

Postcode and Town :

Telephone : Mobile phone :

E-mail :

Date of Birth :

Nationality :

Interests/Hobbies :

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How did you hear about LPBIWC ?

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LPBIWC cannot be held responsible for any accidents, injuries or otherwise which may occur whilst participating in any proposed activity. It is an individual responsibility to take any precautions that may be required.

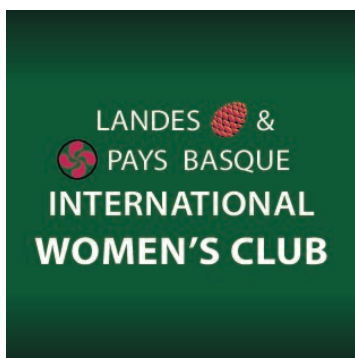
Signature: Date:

Annual Membership runs from September 1st to August 31st. Cost: €40.
For a half of year starting the 1st of March, €20

The fees can be paid :

- By bank transfer (please ask for IBAN details)
- by cheque to "Landes and Pays Basque International Women's Club" Or "LPBIWC"

Upon acceptance of your application and receipt of your payment, we will confirm your membership.



PRIVACY

As a member of the LPBIWC I agree that my contact details can be shared with all members of LPBIWC. I note that the Club will not share my details with third parties.

Name :

Address :

Phone :

E-mail :

Signature : Date :

Please return the APPLICATION and PRIVACY FORMS to :

By post

LPBIWC
Gitte Offredi
24, avenue Capcarrère
40230 Tosse

OR

By scanning (not photographing) the forms only and sending them by email to Gitte.

gitteoffr@gmail.com

If sending an email, please keep the original forms and pass them on to Gitte later.