**WEST BROMWICH LOCAL HISTORY SOCIETY**

**MEMBERSHIP FORM JAN—DEC 2019**

Full Name/s…………………………………………………..……………..…..

…………………………………………………………………………..............

Address………………………………………………………………………….

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……………………………………………………………………………………

Tel No……………………………………….…...Postcode……………………

Email……………………………………………………………………………..

*(the above information is stored on our database so that we can get in touch with you if necessary and is not shared with anyone other than the WBLHS committee. If you prefer that we only retain your name and membership number please let us know)*

I/We hereby apply for **FULL** membership of the society and enclose the annual fee of **£10.00** per person.

I/We hereby apply for **CONCESSIONARY** rate membership and enclose the annual fee of **£7.50** per person

I/We apply for **Junior/Student** membership of the Society and enclose the annual fee of **£5.00** per person

Signed…………………………………………..Date……………………………..

Please return this form at the next meeting or by post to: W.B.L.H.S. Secretary, Mrs.P. Lawley, 102 Vicarage Road, West Bromwich B71 1AG

Tel: 0121 588 4127

Email paulinelawley@talktalk.net

Visitors are welcome at £2.50 per person which includes refreshments

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