



## MEMBERSHIP APPLICATION FORM

If you are interested in joining Southampton & District Transport Heritage Trust, please complete the application form below:

Mr / Mrs / Ms / Miss / Other.....

First Name:.....

Surname: .....

Address: .....

Post Code: .....

Telephone: .....

Email Address:.....

Please enrol me as a member of Southampton & District Transport Heritage Trust

Ordinary £20 .....

I enclose a voluntary donation of £..... This helps support the work and aims of S&DTHT.

Total enclosed £..... (Please make cheques payable to S&DTHT)

*If you do not have a cheque to pay the membership fee, either contact us via the contact number or email address below and arrangements for payment can be made.*

I agree to abide by the rules of the Trust.

Signed ..... Date: ...../...../.....

If you wish to receive authorised correspondence from S&DTHT by post please tick the box:  and to receive electronic messages, please tick the box:

### **Please Send To:**

S&DTHT Membership Secretary

St. Brelade's

Church Hill

West End

Southampton

SO30 3AT

Tel: 023 80472677 Email: [webmaster@sadttht.co.uk](mailto:webmaster@sadttht.co.uk)

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