



CELTIC FRINGE MEMBERSHIP APPLICATION FORM

NAME: ADDRESS:

..... POST CODE

TEL: E-MAIL:.....

TYPE OF BUSINESS:

- I enclose payment by cheque for my first annual subscription payable to "Celtic Fringe".
- I understand that second & subsequent years' subscriptions are payable by Standing Order and have completed and signed the mandate below. I understand that this is **not** a Direct Debit and that I retain full control over the mandate.
- The membership fee is £25.00 in the first year (subsequent years @ £25.00 per annum by Standing Order).

As part of your membership, there is an allotted space on the Celtic Fringe website for a 50-word description of your business. To take up this space, please enclose the relevant text on a separate sheet when returning this form. A link to your website will be included free if this is supplied. If you wish a photograph of your business to be reproduced on the website, this costs an extra £10 per year and the amounts of annual membership fee should therefore be adjusted accordingly.

Bank Standing Order Mandate

To My Bank:-

Would you please accept this as my instruction to make regular payments as follows to the account of Celtic Fringe.

My Bank Details:-

Name of Bank:- Bank Address:-

..... Post Code:-

Account No.:-..... Sort Code:-.....

Payment Details:-

Amount:- £ .00 (..... pounds) Frequency:- **Annually** Start Date:-.....

Period:- Until further notice Please quote reference:- SUBS/..... Payee:- Celtic Fringe Wester Ross

Bank Address:- Bank of Scotland, Gairloch, IV21 2BE Sort Code:- 80-06-87 Account No.:- 00197143

My Name & Address:-

Name:-..... Address:-.....

..... Post Code:-

Signature:- Date:-

Please return the completed form to the Celtic Fringe treasurer:- James Mould, Tigh Charrann, Croft Rd, Lochcarron, Strathcarron, IV54 8YA. Tel/Fax:- 01520 722992. Email:- james.mould@btinternet.com