

CHELMSFORD TWINNING PARTNERSHIP

MEMBERSHIP FORM 2025

Individual subscription £10

*Name

Address (optional).....

.....Post Code.....

Telephone Number (optional).....

*e-mail

* Required information

Please tick to confirm that you wish to receive Chelmsford Twinning Partnership Newsletters by e-mail, or by post if you have no email address.

Please tick to confirm that you are also happy to receive other information relevant to Twinning activities

Signed

If possible, please pay by bank transfer (our preferred payment option), using the following details:

A/c Chelmsford Twinning Partnership

Sort Code: 20-19-95

A/c no: 50262188

Then, to allow us to keep membership records up to date, **PLEASE** e-mail the membership form to Pam Forrester at pamlane@blueyonder.co.uk advising that you have paid by bank transfer.

To pay by cheque, please make cheque payable to Chelmsford Twinning Partnership and return, to Pam Forrester, Membership Secretary, 108 Petunia Crescent, Springfield, CM1 6YR

Members' names and addresses will be held on the Chelmsford Twinning Partnership database for mailing list purposes only. Details will not be shared with anyone else.