NEW CUT HERITAGE & ECOLOGY TRAIL GROUP Membership Form

Membership Form PERSONAL Surname:______ First Name:_____ Address:_____

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				<u>-</u>	
Postcode:		-			
CONTACT D	DETAILS				
Telephone (m	nobile):				
Home (if app	licable): _				
E-mail:			 		
Emergency Name: Tel.:		(needed for su 	uch as Work L	Day activities)	
Address (if di	ifferent fron	n above):			
Group inte	rests (tick	c any applicabl	le):		
[]Heritage	[]Ecology	[] Bird Group	[] Work Days	s [] Meetings	
[] Talks	[] Visits	[] Other (pleas	se specify)		
	-	1ce which I wisvailable & agre		e (tick any applica	ble):

[] Other Experience? _____

By signing the above I agree:

[] Administration [] IT

• To abide by the constitution of the Group and when attending it's activities, contribute for the interest and benefit of it's aims.

[] Work Day/Event Planning [] Practical (non-specific) ground work

• To follow appropriate Health & Safety Guidance and to play an active part in the joint responsibility for the general Health and Safety of myself, Group Members and any third Parties.

[] Promoting [] Funding Bids

• **To update** and keep the group informed of any changed details You will have full voting rights within the Group from the 2nd meeting following acceptance of membership.

SIGNED:	DATE: