

Application for Full Membership

Required information	
(please print)	
Full Name:	
Email Address:	
Contact Address:	
Postcode:	
Contact Telephone:	On Completion please return to: Richard Oakley
Optional information	Treasurer and Membership Secretary The T-Exchange
Mobile:	60 Minefield Avenue Elgin
Experience relating to T-Exchange activities	Moray IV30 6EL
Interests relating to T-Exchange activities	
Activities in which you would like to offer your hel	p
Acceptance I understand that, in signing this application, I accepted will be held in accordance with The T-Exchange Property I will abide by The T-Exchange constitution and art In particular, those relating to health and safety a	ivacy Statement. I further accept thany rules brought into effect by the Trust
Signature	
Date	<u> </u>
Membership Form F100518	