MEMBERSHIP FORM

Please complete in block capitals

Mr/Mrs/Miss

Name:…………………………………………………………………………………………….

Address:…………………………………………………………………………………………

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Post Code:……………………………………………………………………………………..

Email:…………………………………………………………………………………………….

Telephone:…………………………………………………………………………………....

Please return to:

Mrs Harrie Glossop – Membership Secretary

Oakdene

8 The Flats

Blackwater

Camberley

Surrey GU17 0AN

**There is a yearly membership subscription due in April of each year. The amount is at your discretion.**

On joining you will receive an information pack, this will include a list of the Officers of the Charity.

Methods of giving donations and bequests

Cheques to Fleet Hospital and Community Friends

Email – [treasurer@fhcf.co.uk](mailto:treasurer@fhcf.co.uk)

Pay online at [www.fhcf.co.uk](http://www.fhcf.co.uk)

Charity No: 261384