

**HASLEMERE & DISTRICT TWINNING ASSOCIATION
APPLICATION FOR MEMBERSHIP**

**Knowledge of French or German
Is not essential for membership!**

Single £10.00
Family £18.00 (please delete as appropriate)

I/We apply for membership of Haslemere & District Twinning Association

SURNAME (block capitals) _____

FORENAME(S) _____

Address _____

Postcode _____

Home Phone _____

Mobile Phone _____
(useful when abroad)

Email _____

Signature _____

Date _____

*Please send with payment to
Ann Fitchett,
23 Priors Wood,
Haslemere,
Surrey,
GU27 1NF*

OPTIONAL QUESTIONS

Answering the questions below will help us to match you with as appropriate a 'twin' as possible.

Please tick and identify each adult with initials e.g. (CB).

<i>Level of Spoken</i>	<i>None</i>	<i>Limited</i>	<i>Moderate</i>	<i>Good</i>
<i>German</i>				
<i>French</i>				

<i>Age group</i>	<i>18-30</i>	<i>31-45</i>	<i>46-60</i>	<i>60+</i>

<i>Would you like to visit:</i>	<i>Horb</i>	<i>Bernay</i>	<i>Both</i>	<i>Neither</i>

Job/Profession

--

<i>Retired?</i>	<i>Yes</i>	<i>No</i>

Interests
