Application for Membership

☐ I wish to become a _____ member of the Friends of the NRM
(category of membership)

☐ I enclose a cheque/postal order for £ _____ (made payable to FNRM)

OR

☐ I wish to pay by credit/debit card

Card No. ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐ Issue No. ☐☐
(Maestro/solo)

Name on card _____ ☐☐☐☐ ☐☐☐☐ ☐☐☐
Start date Expiry date Security code

☐ I agree that, as I pay UK income tax or capital gains tax equal to the amount FNRM will claim in the tax year in which the payment is made, this may be treated as a Gift Aid donation

Signature _____ Date_____

Please complete in BLOCK CAPITALS

Surname_____ Title (Mr/Mrs/Ms/Dr etc)_____

Forename(s)_____

Address_____

Postcode_____ Phone_____ E-mail_____

Date of birth (Junior members only)_____

For Family and Couple Membership only

Partner
Surname_____ Title (Mr/Mrs/Ms/Dr etc)_____

Forename(s)_____

First Child
Surname_____ Forename _____Date of birth_____

Second Child
Surname_____ Forename _____Date of birth_____

Please **print out** this application and post, together with your cheque or payment details, to:
FNRM, National Railway Museum, Leeman Road, YORK YO26 4XJ

For office use only
Membership No._____
Date received _____