

**LANARKSHIRE GUITAR AND MANDOLIN  
ASSOCIATION**

*1 Fraser Crescent, Hamilton ML3 8LG, Tel 01698 457518*  
www.mandolinscotland.org



**MEMBERSHIP APPLICATION 2009**

Please return your completed application to the Membership Officer at the Freepost address **BELOW**.

**1. I wish to apply for an adult membership (£10)**

Full name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Postcode: \_\_\_\_\_ Tel No: \_\_\_\_\_  
Email: \_\_\_\_\_

**2. I wish to apply for a child membership (£5) on behalf of:**

Child's full name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Postcode: \_\_\_\_\_ Tel No: \_\_\_\_\_  
Email: \_\_\_\_\_  
Parent's/Guardian's name: \_\_\_\_\_ (required)  
Parent's/Guardian's signature: \_\_\_\_\_ (required)

**3. I wish to apply for a family membership (£15) for up to two adults and any number of children in the same family)**

Full name: \_\_\_\_\_ Full name: \_\_\_\_\_  
Full name: \_\_\_\_\_ Full name: \_\_\_\_\_  
Full name: \_\_\_\_\_ Full name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Postcode: \_\_\_\_\_ Tel No: \_\_\_\_\_  
Email: \_\_\_\_\_

**I/We agree that as Members, I/we will abide by the Constitution of the Association.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Cheques should be made payable to the **Lanarkshire Guitar and Mandolin Association** and posted with this application along with a passport sized photograph of each member, to

**LGMA Membership, 5 Main Road, Fenwick, Ayrshire KA3 6AQ.**