



Group Secretary
Charente-Limousine Exchange
2 Rue St Michel
16500, Confolens

MEMBERSHIP FORM

Please write clearly and use capitals throughout

FAMILY NAME			
FIRST NAME(S)			
ADDRESS			
TELEPHONE		E-MAIL	
NO IN HOUSEHOLD		AGES OF ANY CHILDREN	

Please give brief details of your interest, skills or knowledge, current or former profession (*If you run your own registered business see separate section*). For a couple please each give details:

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If you have a registered business in France, please give details below:
NOTE: We cannot include details of your business if it is not registered, although you may indicate if you are currently going through the registration process:

NAME OF BUSINESS	
NATURE OF BUSINESS	
SIRET NUMBER	

WE CIRCULATE A CONTACT LIST WHICH IS SENT ONLY TO ALL CURRENT GROUP MEMBERS TO ENABLE DIRECT CONTACT

Are you willing for your name, address & details to be added to this contact list?

YES:

NO:

MEMBERSHIP IS ONLY **15 EUROS*** PER FAMILY PER CALENDAR YEAR AND IS PAYABLE BY CHEQUE TO **CHARENTE-LIMOUSINE EXCHANGE** BY THE END OF JANUARY.

* New members joining after 1st September of any year can pay a reduced sum of only **7.50 EUROS**.

DATE		SIGNATURE		CHEQUE ENCLOSED	
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PLEASE POST YOUR COMPLETED MEMBERSHIP FORM AND CHEQUE TO THE ABOVE ADDRESS