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SOLENT AMATEUR ASTRONOMERS

FORM A - MEMBERSHIP APPLICATION FORM

Membership required - please tick or cross the applicable category and fee payable.

Joining period	Family	Single	Reduced Single	-
1st qtr (Sep-Nov)	£30.00	£22.00	£13.00	Life - £280
2nd qtr (Dec-Feb)	£22.50	£16.50	£9.75	-
3rd qtr (Mar-May)	£15.00	£11.00	£6.50	Affiliation
4th qtr (Jun-Aug)	£7.50	£5.50	£3.25	-
Group Name (Affiliation only):				Number (Family only):
Surname:		Forename:		Date of Birth:
Surname:		Forename:		Date of Birth:
Surname:		Forename:		Date of Birth:
Surname:		Forename:		Date of Birth:
Surname:		Forename:		Date of Birth:
Address:				
Postcode:			Phone:	
E-mail:				

I / We*, the undersigned, apply for membership. I / We* do hereby agree that as a member / as members of Solent Amateur Astronomers, I / We* will be governed by their Constitution as it is now formed or as it hereafter be altered; provided that I / We* will indicate in writing to the Committee that I / We* wish to withdraw from membership, I / We* will be free of this obligation. (*Delete where applicable.)

Signature:

Date:

Please send this form and your payment to:

S. Oakley. 114 Ticonderoga Gardens, Woolston, Southampton. SO19 9HD.

(Or bring this form and your payment to any meeting and hand it to a Committee member.

Please make cheques/postal orders payable to "Solent Amateur Astronomers")