

APPLICATION FORM

NOTES FOR APPLICATIONS

I APPLY TO BECOME A FRIEND OF FARNHAM YOUTH CHOIR

Full Name _____

YOUR FULL NAME

Full Address _____

YOUR FULL ADDRESS

_____ Postcode _____

e.mail address _____ @ _____

Telephone Number _____

I understand that in return for an annual donation (to be not less than ten pounds)
I will become a Friend of Farnham Youth Choir.

MINIMUM DONATION

You can make your payment either by Bankers Order or by personal cheque. Either
method may be 'Gift Aided' (see enclosed form)

PAYMENT METHOD

I also understand that I will be able to apply for tickets to certain concerts in
advance of the general public.

TICKETS

I will also receive a regular newsletter of the choir together with additional notification
where applicable of events and news of the Farnham Youth Choir that may be
of interest to me as a Friend of FYC.

NEWSLETTERS

Signature _____

YOUR SIGNATURE

Date _____

Date of Application

Please return your completed application form to : -

**The Administrator
The Friends of Farnham Youth Choir
80 Prospect Road
Ash Vale
Surrey
GU12 5EL**