

## Membership Application Form

Please print and write clearly in ink

Name(s) .....

Address .....

.....

Postcode ..... Tel No. ....

Email address .....

Signed .....

Membership is £1 annually  
(members are welcome to offer as much in membership fee as they feel they can afford)

Main reason for visiting/interest in Parc Llewelyn. Please tick those applicable.

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> History                    | <input type="checkbox"/> Trees and landscape | <input type="checkbox"/> Gardens       |
| <input type="checkbox"/> Walking/Jogging            | <input type="checkbox"/> Wildlife            | <input type="checkbox"/> Bird watching |
| <input type="checkbox"/> Other (please state) ..... |  |  |

Please forward completed form together with remittance to the Treasurer:

Mr T.J. East  
21 Cnap Llwyd Road  
Morrison  
Swansea  
SA6 8NT

Please make cheques payable to 'The Friends of Parc Llewelyn'