



MEMBERSHIP APPLICATION / RENEWAL Annual Membership runs from 1st January.

Name				
Address				
Post Code	ePhone			
Email add	ress			
I wish to a	pply for / renew my/our mem	bership of	the KTA	A and
enclose he	erewith a cheque valued: £		to cov	er the
annual su	bscription for:	(Nun	nber of	years)
Signed		Date		
Subscripti Donation Total:	on (1/2/3/4yrs)	£ £		
Ordinary r Students a	ubscription Rates: nember (includes family mem and Visitors Membership	nbers)	£	10.00 5.00 25.00
THE KIRIBA	e cheques payable to: ATI TUNGARU ASSOCIATION and Kilnwood Farm Cottage Rickmansworth Lane Chalfont St Peter Bucks SL9 0QU	send your		

KTA MEMBERSHIP (Standing Order)

BANKERS STANDING ORDER:

To the Manager,
Name of Bank
Name of Branch
Rank Address:
Code:A/c No:
Lucaca novu Tha Kirihati Tungaru Association
Please pay: The Kiribati Tungaru Association,
Acc. No:02226661, Sort Code: 30-94-93
Lloyds TSB Bank plc., 73 Parade, Leamington Spa,
Warwickshire, CV32 4BB, the sum of £10.00 (ten pounds) on the
first day of January each year until further notice.
Signature: Date:
Name:
Address:
Post Code: