

Membership Application Form

Individual Application Form

I wish to be considered for membership of the Bermuda Phoenix Centre.

By signing this application form I confirm that I have read and understand the Rules of Membership and agree to adhere to them in my use of the Centre.

When completed, this form should be given to the Centre Manager, James Collins, at the Centre (address above) or via email to info@bermudaphoenix.org.uk

When your membership is confirmed you will be asked to pay the first annual subscription and this subscription will be renewed each January.

Contact Details	
Name	
Address	
Telephone	
Email address	
Signature	
Date	
<i>For Centre Use Only</i>	
Membership No. and date of issue	

The Bermuda Phoenix Centre Ltd

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