

MEMBERSHIP FORM

Name:Tel No.

Address.....

.....

.....

E- Mail Address:

Single £10

*Family £12

* Family members must live at the same address and be named below:

.....**Age.....

.....**Age.....

.....**Age.....

.....**Age.....

** If under 16

Cheques Payable to: **Rochdale & Bury Bridleways Association**

Please return to: Barbara Brown
81 Harewood Close
Norden
Rochdale
Lancs.
OL11 5TJ