



THE UNIVERSITY OF THE THIRD AGE

MARINA BAIXA

MEMBERSHIP FORM

Please PRINT clearly the following information:

Name.....

Postal Address.....

.....

.....Post Code.....

Tele number.....Mobile.....

Email.....

My main interests are.....

.....

I would be interested in leading a group/s in the following:

.....

I fully understand that I participate in any activity at my own insurance risk. Annual membership is normally due at the end of January. Members joining during the year will be charged @ 1€per month up until January

Signed.....Print.....

Date.....