

<h1 style="margin: 0;"><i>Oswestry Twinning Association</i></h1> <p style="margin: 0;">Membership Application</p>	 <p style="margin: 0;">Oswestry</p>	 <p style="margin: 0;">Combs la Ville</p>
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Surname(s)	Forenames	D.O.B. (If under 18)	Age	Occupation	
Address:					
Post Code	Telephone No.		e-mail:-		
	Home:-				
	Mobile:-				
Languages Spoken	Level (please tick)				
	None	Some	Not Bad	Good	Fluent
French					
German					
Italian					
Spanish					
Others					

General Information:

Requirements			
Dietary (Pleas Tick)	None Specific	Vegetarian	Other
If other please give details:			

Oswestry Twinning Association

Preferences and issues regarding Visits to and from Combs La Ville (please tick)		
	No	Yes
Do you have house pets		
Do you mind house pets		
Do you prefer non-smokers		
Do you mind accommodation with smokers		
Any other preferences		

How many people could you host (please tick)	1.	2.	3.	4.	5.	More.
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Person	Sports/Clubs/Hobbies/Interests. Please state below
1	
2	
3	
4	
5	
6	

Any further comments or requirements:

I Agree to the O.T.A. holding my membership data on Computer?
(Please tick the box below)

Please return form to the Chairman (D.M.Davies, 20 Broadlands Way, Oswestry, SY11 2YD) or e-mail Oswestry_Twinning@btinternet.com

Membership Fees: Individual: £10.00
 Family: £15.00
 Corporate: £20.00

Cheques should be payable to: Oswestry Twinning Association.