



Old Vardean Association

Membership Application

Keith E Elliott

Membership Secretary
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Annual subscription with Newsletters **by email** £5.00
Annual subscription with Newsletters **by post** £10.00

Dear Membership Secretary,

I attended Vardean Boys/Girls School/VI Form College*, and wish to become a member of the OVA.

I enclose: Bankers Order Form / Cheque / Postal order * for £

* Delete as inapplicable

BLOCK CAPITALS PLEASE

(Non UK addresses to be shown in correct format for envelope label)

Title	<input type="text"/>	Forenames	<input type="text"/>	Surname	<input type="text"/>
				Maiden name	<input type="text"/>
Address	<input type="text"/>			Post-nominal letters	<input type="text"/>
	<input type="text"/>				
	<input type="text"/>				
	<input type="text"/>				
Postcode	<input type="text"/>			Years at Vardean	<input type="text"/> - <input type="text"/>
				Phone	<input type="text"/>
				Email	<input type="text"/>
				Occupation	<input type="text"/>
Signed	<input type="text"/>			Date	<input type="text"/>

Also available while stocks last

Prices include p&p

OVA ties £9.00

"Onwards and Upwards" a history of Vardean (hardback) £13.60

"The Vardean Register" (Who's who) pilot ed. Soft cover £20, CD £10.

Please complete the enclosed proforma for your entry in the Vardean Register.

Routing:	Keith E	Ron McL	Clive H	tba	Paul R	Jim F
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BANKERS ORDER FORM

To (Bank)

Alliance & Leicester Commercial Bank plc
Bootle
Merseyside
GIR 0AA

Bank plc

Branch

Address

From (Account holder)

<input type="text"/>
<input type="text"/>
<input type="text"/>

Please transfer from my/our bank account:

A/c Name	<input type="text"/>	Sort code	<input type="text"/>	A/C No.	<input type="text"/>
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to the credit of the

Old Vardean Association,

Alliance & Leicester, Sort Code No. 72-00-03, a/c No. 2 423 4007

the sum of **£ 10.00** **£5.00** * now and on 1st April next year and at annual intervals thereafter until cancelled by me in writing.

* Delete as inapplicable

Please quote reference:

(your surname then initials)

e.g. SMITHAB

This replaces any previous outstanding order for transfer to the same account.

Signed:	<input type="text"/>	Date:	<input type="text"/>
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Please return complete form to Membership Secretary