

**Application Form**

Name..... Partner.....  
Other Family Members .....  
Address .....  
.....  
Phone No..... Email.....  
SIGNATURE..... Date.....

DATA PROTECTION ACT:the data supplied on this form may be stored on computer. Your above signature will taken as permission so to do.

**STANDING ORDER FORM**

To:.....Bank plc  
Account No. ....  
Sort Code No. ....  
Address .....  
.....  
.....  
.....

**Please pay to:**  
FOLKESTONE TWINNING ASSOCIATION (A/c # ) at 61483277  
HSBC Bank plc (Sort Code 40-21-15)  
Sandgate Road  
Folkestone CT20

The sum of £ 6/£10 (enter amount in figures and words)  
and the SAME AMOUNT on January 1 each year thereafter.

Signed ..... Dated.....  
Name (in capitals) .....  
Address .....  
.....  
.....  
Post Code .....

Note:  
Please send this form directly to the Treasurer, and not to your bank:-  
PJ Fox , The Battery, The Bayle, Folkestone CT20 1SQ