## Kelvedon Institute 200 Club

## **APPLICATION FORM**

Full Names:		
Address		Post Code
Telephone		
I would like to join the k	Kelvedon Institute 200 Club. I am o	over 18 years old.
	receive a membership card with m	per month (£24 per year) for each number. y number(s) on, which will act as my receipt
I will now either fill in Pa High Street, Kelvedon		ole form to The Kelvedon Institute, 78
Part A	,	
I would like to pay by Stand	ing Order and will fill in this instruction t	o my bank.
То	Bank/Building	Society
	Address	
	Post Code	
My account name:		
I/we hereby authorise and in £ (insert amount in mu	Sort Code nstruct you until further notice to debit the ltiples of £2) on the fifth day of	 he above account with the sum of (month) 2015 and on the fifth day of each
month thereafter * £ (insert amount in m intervals thereafter *	ultiples of £6) on the fifth day of	(month) 2015 and at 3 monthly
£ (insert amount in m *(Please delete as appro quoting my name with 200 t	opriate)	(month) 2015 and annually thereafter *
	<b>ount number 00025646</b> gs Hill Avenue, Kings Hill, West	<b>Sort Code: 40- 52 -40</b> Malling, Kent, ME19 4JQ
Dated this day of	201	
Customer signature(s) _		
Contact Telephone Num	ber	
<u>Part B</u> I would like to pay by cas	sh or cheque for the year commencir be made payable to The Institute ar	ng (month) and enclose £ (£24 per nd sent to A Franchi, Kelvedon Institute, 78
Sianed	Name	Date