



METHODY COLLEGIANS

Membership Application Form

I wish to apply for a new/renewed/associate membership of Methody Collegians *

* Please delete as appropriate

NAME: Title: Mr/Mrs/Miss/Ms/Other (please specify)*

Forename: (by which known) Initials:

Surname:

PERMANENT ADDRESS:

POSTAL ADDRESS:

(if different)

TELEPHONE: Home:

Business:

Mobile:

EMAIL ADDRESS:

I attended MCB/Wesley College (for Associates) as a student/teacher * From: to:

OCCUPATION:

ACADEMIC OR OTHER DISTINCTIONS:

DATE OF BIRTH: SIGNATURE:

I enclose a cheque for £15, payable to Methody Collegians.

Please note that this payment goes towards supporting activities and administration costs for the financial year of the Association which runs from 1 April to 31 March of the following year.

Please return the completed application form with your cheque/direct debit mandate to the Honorary Membership Secretary, Joanne Mehaffy, 11 Church Avenue, Dunmurry, Belfast, BT17 9RS.