Preston Black History Group Membership Application Form

Title					HISTORY			
First Name						GROU	JP	
Surname						-		
Group/Organisation								e C
Address						J.		ALT.
						~		M. Comment
						/	1 / 1 / 1 / 1 / 1	
Post Code								
Tel							Gender	
Mobile							Male	
Email							Female	
Prefered contact style:			Email		Pos	it 🔲	Text	
Age Group	Under 18		19-25		26-	35	36-45	
	46-55		56-65		ove	er 65		
Do you have a disability that you would like PBHG to be aware of?								
Please indicate visual/auditory/mobility support needs.								
Details:								
I wish to join Preston Black History Group as a :-								
Individual Member							£5.00	
							£10.00	
							£20.00	
Lifelong Member £50.00								
I wish to become a member of Preston Black History Group. I have read and support the group's aims and objectives.								
Signed								
Date								
Please send your remittance to; The Secretary, Preston Black History Group, c/o CVS Central Lancashire, Units 23/27								

Guild Hall Arcade, Lancaster Road, Preston, PR1 1HR. Payment by cash or cheque, made payable to Preston Black History Group or contact the Secretary for other options.

For more information about Preston Black History Group please visit our website www.prestonblackhistorygroup.org.uk

Researching, Preserving and Celebrating Black History and Culture, a shared history FOR ALL.

All information supplied will be treated in accordance with the Data protection Act 1998