Lewes Priory Trust



Membership Form

| I/We enclose £ (Individual £10/Joint £ | 15/Concessions £7.50) being my/our |
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| subscription for the forthcoming year plus my/our donation if applicable). | |
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| Membership Category (please delete as applicable) | |
| INDIVIDUAL / JOINT / CONCESSION (retired, jobseekers, students) | |
| Payment Method: (please delete as applicable) | |
| CHEQUE (payable to Lewes Priory Trust) / STANDING ORDER / OTHER (please specify) | |
| TAX RECLAIM DATE/ | / |
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| Signature(s) | |
| Please treat my/our subscription and any donation as "By signing this form I/we confirm I/we pay income or ca | |
| Please tick this box if you would like a receipt — | |
| Please reply to: | |
| Membership Secretary, 19 Cluny Street, Lewes, East Sussex BN7 1LN | |
| e-mail: membership@lewespriory.org.uk | |









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