

4 Wellington Parade, Dukinfield, Cheshire, SK16 4LE Tel: 0161 330 7778 e-mail: sight@tamesidesight.org.uk www.tamesidesight.org.uk Registered Charity No. 504063

Membership Application Form

Name
Address
Post Code
Telephone No
E-mail address
Do you have a visual impairment? Yes / No
In which format would you like to receive correspondence
Standard Print Language (other than English)
Large Print CD E-mail Braille
I enclose my membership fee for the current year £
I support the aims of Tameside Sight.
Signature
Date
NOTE: TAMESIDE SIGHT WISH TO HOLD MEMBERSHIP RECORDS ON COMPUTER; IF YOU HAVE ANY OBJECTION TO THIS PLEASE INDICATE ON THIS FORM.
For office use only
Recieved by Amount Date
Date of joining



