



## ANNUAL RENEWAL FORM

**Family Name and Forename(s)**

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**Address**.....

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**Telephone**..... **Email**.....

**Please indicate whether you wish for a single or a family membership**

Single membership is **10€**. Family membership is **16€** (includes children up to 18 years old)

Subscriptions are due annually on **1<sup>st</sup> September**

**Date and place of birth for each member**

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**Signature** .....

Pay by **bank transfer or cheque**

**Bank transfer:** ASS.FRANCO BRITANNIQUE. IBAN: FR76 1551 9390 6700 0204 6810 156 BIC: CMCIFR2A (include your name as reference) **OR** a **cheque** payable to : **AFB Moutiers**

Send the completed and signed application form and cheque where applicable to:

**M. David Taylor**  
**7, rue du Maréchal Foch**  
**85560 Longeville-sur-mer**

Email: [dave.taylor@orange.fr](mailto:dave.taylor@orange.fr)

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**For use by the treasurer**

**Payment:**

**Method:**

**Date:**