MEMBERSHIP SUBSCRIPTION FORM (INDIVIDUAL)

RETURN TO:
Valerie Cuell
FWB Treasurer
22 Chandlers Walk
Dalgety Bay
KY11 9FE

MEMBERSHIP DETAILS

Full Name:

If your name has changed since last syllabus please write previous name here:

Company:

Position and/or Department:

Address:

Post Code:

Tel No: **Mobile No:** **Fax No:**

Email:

Alternate Email (if required for FWB communications):

Website: http://www.

Company's Main Product/Services (*Up to forty letters including spaces for inclusion in the syllabus (NOT FORTY WORDS)*)

I **do/do not** wish to receive emails deemed of interest to FWB members (delete as appropriate)
No information held by Fife Women in Business is passed on to a third party without prior consent.

I hereby enclose my cheque made payable to Fife Women in Business for **£35.00** representing subscription for **one year from date of application.** (Subscription rate applicable May 2009 – May 2010)

** Membership of this Organisation is dependent upon attendance at no less than three Ordinary Business Meetings per annum*

Signature_____ Date_____

Please note, unless you have been a member in the preceding year, applications will be circulated to other members, and provided no objections are received within 14 days, you will be fully admitted as a member of FWB.

Contact FWB on **07783 506 808** if you have any queries