



APPLICATION FORM

NAME Mr./Mrs/Ms./Miss

ADDRESS
.....

POSTCODE Tel.No.

E-mail address if you would like to receive
booking forms and other information electronically instead of by mail.

NOMINATED JOINT MEMBER Tel.
No..... **(for single member households only)**

I/We apply for membership of the STRETTON THEATRE AND CONCERT GROUP for the
current season of theatre/concert visits.

I/We enclose remittance of £15.00 (i.e. Joining fee of £5.00 per household;
and Annual subscription of 10.00 per household) to cover until **31.03.2021.**

Cheques should be made payable to '**Stretton Theatre and Concert Group**' and sent with this
form to the Membership Secretary – Mrs. Jenny Heath (STCG), Knollcrest, Trevor Hill, Church
Stretton, Shropshire SY6 6JH (Tel: 01694 722216)