

APPLICATION FOR MEMBERSHIP OF THE HALIFAX AGRICULTURAL SOCIETY LTD.

FIRST NAME……………………………………………. LAST NAME…………………………………………….

STREET ADDRESS: ……………………………………………………………………………………………………………

CITY…………………………………………………… POST CODE…………………………………………………………

PHONE NO……………………………………………email………………………………………………………………….

MEMBERSHIP TYPE:

PLEASE TICK:

ANNUAL ADULT (£35.00 PER YEAR) ………

LIFE MEMBER. (£350) ………

ARE YOU:

A NEW MEMBER ………

AN EXISTING MEMBER ………

WOULD YOU BE INTERESTED IN HELPING WITH THE SHOW Yes/No

PLEASE COMPLETE THE FORM AND RETURN TO: [members@halifaxshow.uk](mailto:membership@halifaxshow.uk)

BACS PAYMENT DETAILS: SORT CODE: 60 09 27. A/C NO. 83804900

THE HALIFAX AGRICULTURAL SOCIETY LTD.

OR PRINT & POST WITH YOUR CHEQUE TO:

MEMBERSHIP

HALIFAX AGRICULTURAL SOCIETY LTD.

23 ROSELEE CLOSE

SIDDAL

HALIFAX

HX3 9BT