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## Membership Form

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| Name: |  |  |  |

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| Address: |  |  |

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| --- | --- | --- | --- |
| Phone: |  | Email | : |

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| --- | --- | --- | --- |
| LAA Member? |  | Number.: |  |

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| --- | --- |
| Skills, help or expertise offered: |  |

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|  |  | | |  |  |
| Do you hold a current DBS Certificate? |  | Expiry date? |  | | | |

Membership Fees: **YES** doesn’t charge a membership fee, as we feel your help is your membership fee.

If you wish to unsubscribe, please contact the secretary. Thank-you for your support.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Signed:  (or print) |  |  | Date: |  |

Details from this form are only used for admin purposes within this organisation, and will not be divulged to anyone outside.

Please return this form to the YES Team or by email to [secretary@yesflyers.org.uk](mailto:secretary@yesflyers.org.uk) Thank you DH0321