

GDL MEMBERSHIP FORM

Company Name: _____

Company Contact Name: _____

Company Contact's Address: _____

Youth/Adult/Individual Membership: _____

Landline Tel. No: _____

Mobile No: _____

E-mail: _____

**I enclose *£24.00 Adult or £12.00 Youth (age up to 25 years) or Group Membership
£12.00 Individual ** Fee made payable to The Glamorgan Drama League.**

Signed: _____ Dated: _____

www.glamorgandrama.org

Please forward this form to
Ms Teri McCarthy,
Chair,
10, Brachdy Close,,
Rumney,
Cardiff.
CF3 3AU.

* Membership fees are due annually on 5th January.

** Please delete where applicable.
