

3, Dinham Hall, Ludlow, SY8 1EJ

## **Ludlow French Twinning Association**

Family form/membership details					Date		
Adults							
Surname	First name	M/F	Occupation		Date of birth	Relationship	р
Children/student	ts up to 18 years						
First name (sui	rname if different fi	om abo	ve) M/F	Dob			
Address (includir	ng postcode)						
email address:							
Tel no (incl. code	e) Mo	bile					
	ily – if known nterests:						
Does any membe	er of the family spea	ak Frenc	h and to what	: level?			
Do you smoke	Are you prepared to	o accept	smokers?				
Do you have any	pets – or objection	to pets?	?	••••			
	allergies or require	•					
		•					
	Pauline Oram, mem ham Hall, Ludlow S	•	•	ram@gmai	l.com	tel: 07745 531783	
•			·			ay by BACS transfer to	)
	g Association, sort (						
_			-			ram. Treasurer. Apart.	