



Application for membership



www.winchcombe.co.uk

Working for Winchcombe

Your name: Title _____ First Name _____ Surname _____

Your Business name: _____

Your Address: _____

Phone: _____ Fax: _____

Email: _____ Website: _____

Type of Business: _____

Length of time your business has been established: _____

Do you trade mostly (please circle): Locally Nationally Internationally

Do you operate your business from: Home Business Premises

Will you offer a discount to other Forum members? Yes / No

If "Yes", please provide details here: _____

For your PRIORITY listing on www.winchcombe.co.uk please tell us how you would like to describe your business on the Winchcombe website (max 60 words):

Do you have any skills/expertise that you could offer to the business and wider Winchcombe community?

Return your completed form (with a cheque for £25 made payable to the Winchcombe Business Forum) to:

Vince Royle

Membership Secretary

c/o Cotswold Eye Care Centre

High Street

Winchcombe, GL54 5LJ.