



Bristol Classical Guitar Society – Membership Application

Surname :	
First Name :Kı	nown As :
Address:	
Membership Type : Full or Af	filiated (circle as appropriate)
Home Tel No :	
Mobile :	
E-mail :	
have received a copy of the Constitution and understand and am willing to abide by its rule	
will endeavour to attend monthly meetings a events. I understand that one of the key object playing the guitar, whether as a solo or in ense	tives of the BCGS is to involve members in
I have paid my first year's membership fee – Full Member only.	
Member Signature	Amount Paid
Dated	Mem Sec or other Cttee Member
	Dated
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