

# Bishop's Castle Heritage Resource Centre



## Affiliation Form

Name of organisation (if applicable):

Name of representative (or individual if this is an individual affiliation):

Position in organisation (if applicable):

Please tick here if this is an individual affiliation @£10

or an organisation affiliation @ £25

Address:

Tel No:

Email

Date of affiliation:

Method of payment (please tick):

Cheque

Direct Debit

Cash

**The individual or organisation above affiliates to BCHRC for one year from the date above. I understand that all resources and facilities at BCHRC except storage, which is charged at the full rate, are discounted by 25% when they are used on behalf of an affiliated organisation or by 10% when used by an affiliated individual. Discounts do not apply to individual members of an organisation for their own use.**

Signed

Date

**For BCHRC use**

**Date invoice/receipt issued:**

**Invoice/receipt no:**

**Date payment/Direct Debit mandate received**

**Renewal date:**