

Application form ( No. ……………….) for membership of the Face2Face Parkinson’s Community Interest Company whose objective is to enable and enhance the quality of life for people living with Parkinson’s. Please complete the first 2 boxes and return to a member of F2FP.

Name/s

Address

Post Code

E-mail address

Contact Telephone number

Please provide a brief description of why you would like to become a member.

Application approved/declined

Signed by: E.Y.Carter - Membership Secretary On behalf of the directors of Face2Face Parkinson’s. Date:

Applicant notified by :- Date

Assigned Membership Number

10 Charborough Road, Filton Park, Bristol BS34 7RA

Registered Number 12739859 England