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Membership Form 20 / 20

Name:		
Phone:	Mobile:	
Street		
Address:		
Postal		
Address:		
Email		
Address:		
Emergency Contact Information:		
Name:	Phone:	
Signature:	Dated:	
	2	
Membership Subscription		
Membership - \$20.00 and	nually	
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Donation - \$		
		

Email: pittsworthwomensshed@gmail.com Website: www.PittsworthWomensShed.com