

Helensburgh and Gareloch Horticultural Society



MEMBERSHIP FORM 2024 - 2025 APPLICATION / RENEWAL *

1st May – 30th April

(* Please circle as appropriate)

PLEASE PRINT CLEARLY	
TITLE: (MR, MRS, MS etc)	MEMBERSHIP NUMBER:
NAME(S):	
ADDRESS:	
POST CODE:	TEL/MOBILE:
EMAIL:	
Membership: (please tick appropriate box show	ving method of paying)
 Individual £10 Family £15 (Couples/1 or 2 at a complex) 	adults and any children under 16yrs age at same address)
If paying by cheque (or cash): Please make cheque payable to Helens l	burgh & Gareloch Horticultural Society and send to:
• • • • • • • • • • • • • • • • • • • •	m, 31 East Montrose St, Helensburgh, G84 7HR l: Judith.kemp38@icloud.com
If paying by Internet Banking: reference HGHS Banking details: Sort Code: 80 Date of internet payment:	
• •	Protection Regulation (May 2018), the Officers of HGHS) ask you to read, sign and return the following to: st Montrose St, Helensburgh, G84 7HR
Helensburgh & Gareloch Horticultural Society (HGHS). 2. My personal address, email address and telephone deta 3. My personal address, email address and telephone deta	supplied above in order to send me news and information about the ails will never be passed on to any company or individual. ails are kept safely on computer and paper by the Officers and they are the event of my death, or I no longer wish to be a member of HGHS, my
Date: Si	igned: