

Membership Application Form

Full Name (block capitals).....

Address (block capitals).....

.....**Post Code**.....

E-mail Address (block capitals).....

Phone (Day).....**(Eve)**.....**Mobile**.....

Are you a member of another Toastmasters Club **Yes**..... **No**.....

If Yes, what is the name of the Club?.....

How did you first hear of our club?.....

What would you like to achieve from your membership of 1st London Toastmasters?

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Would you like a club member to help you as a mentor? **Yes**..... **No**.....

Signature.....**Date**.....