

Application for **GROUP** Membership

Thank you for subscribing to a 1-year Membership with the Institut Français. To know more about the benefits you are entitled, please ask us at the reception or [check online!](#)

Surname _____

First name _____

Address _____

Town _____

Postcode _____

Email _____

Telephone _____

Are you a returning member? Yes No

Age group 15-17 18-26 27-45 46-65 65+

Nationality British French Other: _____

YES, I agree for my email to be added to **the newsletter of the French Institute** for communication purposes. Your email will never be sold or communicated to a third party without your express consent.

Signature _____

For office use only

Date d'adhésion : _____

Code barre BCDI : _____

Carte : Remise Envoyée

Montant : _____ Ref AEC: _____

CB Chèque Cash

Membership category (please tick as appropriate)

<p>Group Correspondent Membership</p> <p>Name of the group: _____</p> <p>Area: _____</p> <p><input type="radio"/> Name, email of the correspondent (if different from above): _____</p> <p>Number of people: _____</p> <p><i>We will contact you shortly to set up the group membership.</i></p>	<p>£10/member Free for the correspondent</p>
---	--

Payment may be made by credit card, cheque payable to "the French Institute" or in cash at the front desk
You can also order and pay online using our [Online Payment Platform](#)