Application/renewa	I form: PLE	<u>ISE WRITE CLEA</u>	<u>RLY</u>
EITHER   I am a new member OR   I am renewing my membership			
Please enrol me as a minclude Journal 79 to b			for the year beginning April 2025, to
Name: [Mr/Mrs/Miss/M	ls/Dr/	]	
Address:			
email address:			
website address:			
Please add a link t	o my websit	e from The Galpir	Society website
*Students only* Tutor	s signature_		
*Under-25s only* Year	of birth _		
PAYMENT			
	UK	Outside UK	
Individual member:	£39	£49	
Institution:	£62	£72	
Student/Under-25:	£19.50	£24.50	
Joint members:	£41	£51	
☐ I will pay via PayP	al after I ha	e received my m	embership number
OR			
Please email me d	etails for pay	ing direct into th	e Galpin Society bank account
OR			
I enclose a UK che	eque for £	made p	payable to the Galpin Society
Please post or email the Christopher Goodwin,	•		ay, SHARNBROOK, MK44 1LE, UK
email: admin@galpinso	ociety.org		