

Friends of Benny Bear Club Membership

Yes please, I want to join as a friend

Benny Bear Club



My name is _____

Address _____

Date of birth _____

Male



Female



Phone: _____ Email _____

Parent/Guardian _____

Address _____

Phone: _____ Email _____



I/we wish to receive
future membership
mailings by
email
by post (please tick)



Spina bifida • Hydrocephalus • Information • Networking • Equality - SHINE



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