

I wish to purchase a **Gift Membership of the Friends of Hospitalfield** for the following recipient(s) at a rate of £25.00 for an individual or £40 per couple for the year 2011.

PERSONAL DETAILS of recipient(s):

Title.....Name 1.....

Address 1.....

.....

.....Postcode.....

Tel.....Email.....

Title.....Name 2.....

Address 1.....

.....

.....Postcode.....

Tel.....Email.....

Please note we respect your privacy and your details will not be passed on to any 3rd party without your consent.

YOUR DETAILS:

Title.....Name.....

Address 1.....

.....

.....Postcode.....

Tel.....Email.....

I enclose a cheque payable to Hospitalfield Trust for £.....

Please send to: Friends of Hospitalfield, Hospitalfield, Centre for Arts and Culture, Arbroath, Angus DD11 2NH.