

# INTERACTiON Membership Form

Use a separate form for each adult membership. Please contact us about child memberships.

Please tick the appropriate boxes.

I would like to purchase a Supporting  Attending  Child  Membership

Child's Date of Birth \_\_\_\_\_

I Voted  Am a Friend  Am a Pre-supporter

Please use block capitals when completing this form.

Family Name: \_\_\_\_\_

Given name(s): \_\_\_\_\_

Badge Name: \_\_\_\_\_  
(optional)

Address: \_\_\_\_\_

City: \_\_\_\_\_ Postcode: \_\_\_\_\_

Country: \_\_\_\_\_ Nationality: \_\_\_\_\_  
(optional)

e-mail: \_\_\_\_\_

Date: \_\_\_/\_\_\_/\_\_\_ (e.g. 1/JAN/2000)

I do not want my name/country in the web listing  (please tick)

*Cheques and credit cards are accepted. Please make cheques payable to  
INTERACTiON*

I wish to pay by Cash  *Please do not mail cash.*

Cheque  Amount: \_\_\_\_\_ Cheque Number: \_\_\_\_\_

Credit Card: \_\_\_\_\_ Amount: \_\_\_\_\_ Card Expiry Date: \_\_\_\_\_  
(Visa/MC/Amex)

Name on Card \_\_\_\_\_

Card Number: \_\_\_\_\_

Signature: \_\_\_\_\_

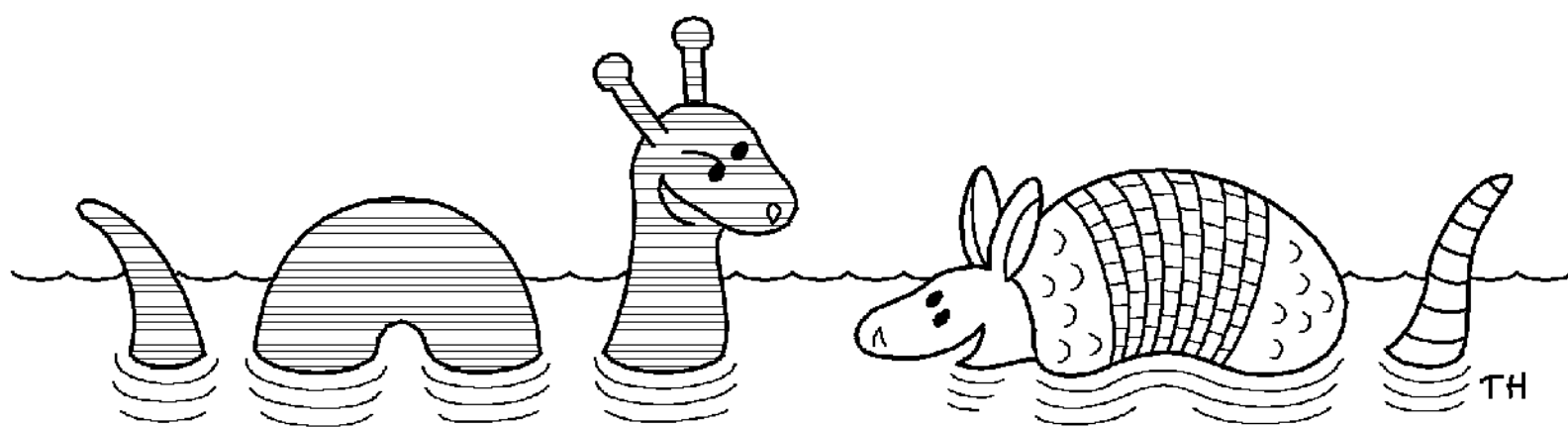
Contact INTERACTiON

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<http://www.interaction.worldcon.org.uk/>

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