



# UKARA

## United Kingdom Audio Recording Association

### Membership Application Form

Name: .....

Address: .....

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Telephone: .....

E-Mail: .....

I agree that the above details may be held on a computer database for the purpose of running the association.

I agree that the above address details above may be circulated amongst the members for the purpose of mutual communication.

Signed: .....

Date: .....

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**President: Tony Faulkner**

**Vice President: Gordon Furneaux**

**[www.ukara-gb.eu](http://www.ukara-gb.eu)**

**e-mail: [contact@ukara.eu](mailto:contact@ukara.eu)**

Please return to the Association Co-ordinator:

**contact@ukara.eu**

or

Peta Simmons, 42 Lewis Road, Chipping Norton, OX7 5JS.

Membership Fee = £5.00

Payment can be by: Cash to the Co-ordinator or treasurer

Cheque made payable to LINDA JONES with UKARA written on the back

Direct Bank transfer to: Sort Code: 30-67-64, Account number: 16576768

Reference UKARA and your surname.

For office Use Only:

Date received.

Membership Number:

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