Membership Application Form

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| --- | --- |
| Name:  |  |
| Email: |  |
|  |  |
| Are you happy to share your email address with other RPFPS Members?YES / NO *please delete as applicable* |
|  |
| What years did you attend Raynes Park High School/Sixth Form?From:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ To: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ School House: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |
| Any other comments (e.g. what would you like the society to offer?): |

Signed Student ……………………………………………... DoB: ………………………

Signed Parent/Carer (if under 18): …………………………… Date: ………………………

Please send completed applications by email to: Ron Ribolla, at ronribolla@yahoo.com, or in person via the School’s main reception.