

Customer Reference Number (if known) _____

Please renew/enroll us/me as a:

Church Member* **Subscriber (£45)** **Friend (£10)**

* For the church membership scheme the cost is £20 for the first 100 people and £3 for each additional 50 or part there of.

Church or organisation name: _____

Address: _____

| | Amount | Cost |
|---------------------------------|--------|------|
| Adults | | |
| Children (Under 11) | | |
| Young People (12-18) | | |
| Total | | |
| Donation to Christian Education | | |
| Total Amount | | |

Contact person or individual members name: _____

Address: _____

Post Code: _____ Telephone Number: _____

Fax Number: _____ E-mail: _____

I enclose a sterling cheque (payable to IBRA) Please charge my Mastercard, Visa, Switch
(Delete as appropriate)

Card Number:

Security Number: (Last 3 digits on signature strip)

Issue Number (Switch only): Expiry Date: /

Signature: _____

**NO APPLICATION
CAN BE PROCESSED
IF PAYMENT IS NOT
ENCLOSED**