

The Luton Paranormal Society Membership Form

The Luton Paranormal Society
29 Strathmore Walk
Luton
Bedfordshire
LU1 3PD.

Tel: (01582) 416562 or Email: andy@lutonparanormal.com



Please fill in your details for membership below:

Date: ___/___/___ Name: Mr / Mrs / Miss _____

Date of Birth: ___/___/___ Current Age: _____

E-mail address: _____

Full Address: _____

Telephone (Including code) : _____ Mobile: _____

Please circle the following option, if you would prefer to have your newsletter and correspondence sent by email or by regular post: Email / Postal Service

Please tick type of membership such as new or renewal

I am applying for a new membership and enclose the membership fee of £15 ()

My membership number is () and I enclose my renewal membership fee of £15 ()

How did you hear about the Luton Paranormal Society ?

Please circle one of the following: Newspaper Radio Website Other

If other please state: _____

Please choose one of the following options

I give / do not give permission for LPS to share my contact details with other members.

I am / am not currently a member of any other paranormal organisation please state the name of that organisation: _____

I do / do not have my own transport to get to LPS investigations events.

LPS Liability and Confidentiality Clause

(please read and sign only if you agree with below)

I am aware that there will be occasions where I will be attending Luton Paranormal investigations where my health and safety cannot be guaranteed. I therefore accept all responsibility for my actions and agree that the Luton Paranormal Society will not be held liable or responsible in any shape or form should anything happen to me. I am also aware that while a member of LPS I may become aware of information that is confidential to LPS and its members only, therefore I agree not to break confidentiality of LPS.

Name: _____ **Signature:** _____

Please mark all cheques as payable to A.Fazekas and return to the above address