

# PAG Membership Form

Written by PAG

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**Positi~~v~~e**  
**Action Group**

## MEMBERSHIP APPLICATION

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Name.....

Address.....

.....

Post Code..... Telephone .....

Facsimile..... Mobile.....

e-mail.....

# PAG Membership Form

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I apply for FULL / SOCIAL / ASSOCIATE / JUNIOR\* Membership

\*Delete as appropriate

I enclose the Membership Fee / Donation of £ .....

( [see here](#) )

Signed ..... Date ...../...../.....

Please send completed applications to:

**Treasurer, Positive Action Group, Balladane, 7 Castle Mona Avenue, Douglas, IM2 4EA**