



FRIENDS OF LES BOURGS HOSPICE LBG

LBG CONSENT FORM

(CONFIRMATION OF MEMBERSHIP AND GUARANTEE)

I, (full name)

Of, (full address)

Email address
(If applicable)

Hereby confirm that:

1. I agree to abide by the Memorandum and Articles of Association of Friends of Les Bourgs Hospice LBG; and
2. In the event of Friends of Les Bourgs Hospice LBG being wound up, I agree, as a member of the aforesaid company, to pay the sum of one pound (£1).

Signed

Date

Notice:

Please advise by ticking the relevant box below how you wish to receive notice of company matters, including written resolutions and meetings:

a) The Company's website (www.lesbourgshospice.org.gg)

b) Email (please provide your email address above)

If you do not tick either of these boxes you will received notice by letter at the address you have provided above.

**Once completed this form should be returned to:
Company Secretary of the Friends of Les Bourgs Hospice
Andrew Mitchell House
Rue du Tertre
St Andrews
GY6 8SF**

Should you require further information on Friends of Les Bourgs Hospices' s status as a company limited by guarantee, or you have any queries regarding completion of this form please speak to the company secretary or another member of the general committee.