



## Individual Membership Form

<b>Name:</b>	
<b>Address:</b>	
<b>Post Code:</b>	
<b>Tel:</b>	
<b>Email:</b>	
<b>Please give a short note of your interest in Edinburgh Community Food below:</b>	

**I enclose the sum of £1.00 for 2010/2011 membership.**

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Name in Block Capitals:** \_\_\_\_\_

**Please make cheques payable to ECFI Ltd**