

*Venus Membership Form*

*Name:* .....

*Address:* .....

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*D.O.B:* .....

*Contact Details:*

*Phone:* .....

*Fax:* .....

*E-mail:* .....

*How would you like to be contacted:*

*Phone*       *Fax*       *E-mail*

*Signature:* .....

*Please Fax the completed form to 020 7242 1578 or by post to:*

*Venus Table Dancing*

*29-35 Farringdon Street*

*London EC1M 3JD*