**Nature Trust Malta**

**Membership Form / Renewal 2017**

|  |  |
| --- | --- |
| **Name:** | **Surname:** |
| **House Address:** | |
| **Email Address:** | |
| **Telephone Number:** | **Mobile Number:** |
| **ID Number:** | **Date of Birth:** |
| **Other Family Members** *(please include date of birth and email address)* | |
| **Date:** | **Signature:** |
| **Year you joined NTM (in case of renewal)** |  |

**If interested in being an Active Member kindly indicate areas**

Activities and Events

Fundraising and marketing

Manning NTM stands in Fairs etc

Helping at the Indigenous tree Nursery

Patroling NTM sites and Guiding visitors

Hedgehog Rescue and or Rehabilitation

Clean ups

Design of material

Office work

***Please note that all data in this membership form will be***

***kept confidential as per data protection act.***