

Office use: FL .....  
Date enrolled:  
Referred by:

**TALKING NEWS FEDERATION**  
Registered Charity 1108294

**08712 265506**

**MEMBERSHIP APPLICATION FOR "FENPROBE" TN**  
The Talking Newspaper for the Blind and Visually Impaired in East Cambs.  
Registered Charity CFB 279355R  
**01353 861153**

NAME.....

ADDRESS.....

.....

.....

..... POST CODE.....

TEL.No ..... e-mail \_\_\_\_\_

BIRTH DATE..... Day/ Month/ (Year optional)

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Registration No. Blind/Partially Sighted: .....,/.....

If the applicant is NOT Registered Blind, the following must be signed by the applicant's Doctor, Ophthalmologist or Ophthalmic Optician

I..... (Name, please print)

..... Business/Surgery Address

.....

.....

..... Status/Qualifications

certify that the above named has defective vision (generally N12 or worse with spectacles)

Signed..... Date .....

This Application Form should be sent to: The Secretary, Fenprobe TN  
for retention at the following address: 58 Ely Road  
Littleport  
Ely, Cambs. CB6 1HL