



MEMBERSHIP APPLICATION

Your BDS membership is important to us as we broaden the base of support for debate in the community. Thank you for considering or renewing membership.

Name: _____

Address: _____

Telephone Numbers:

_____ (home) _____ (work) _____ (cell)

Email: _____

ANNUAL MEMBERSHIP (SEPT 06 – SEPT 07)

Please tick one:

___ \$25 Adult/Family

___ \$10 Student

Payment: ___ Cash OR ___ Cheque

VOLUNTEERING

If you wish to volunteer, please indicate your area of interest below:

___ Judging ___ Newsletter ___ Videotaping debates

___ Assisting schools ___ Training Workshops ___ Fundraising

___ Other, please specify: _____

The Bermuda Debate Society is committed to:
*increasing the number of students and schools involved in debating
and training a strong National Debating Team.*

P.O. BOX HM 2982 HAMILTON HM FX
www.debate.bm Registered Charity No. 325