



FORM OF APPLICATION FOR MEMBERSHIP

Category of Membership applied for - Associate/Full (delete as appropriate)

NAME.....

ADDRESS.....

.....

E-MAIL ADDRESS.....

CONTACT TELEPHONE NUMBER.....

DATE OF BIRTH.....

OCCUPATION.....

PROPOSER'S NAME.....

PROPOSER'S SIGNATURE.....

SECONDER'S NAME.....

SECONDER'S SIGNATURE.....

I have read the Club rules, with the objects, duties and obligations detailed therein, and I accept all those rules and conditions as detailed.

APPLICANT'S SIGNATURE.....

DATE.....

APPLICATION APPROVED BY COMMITTEE

DATE.....

PRESIDENT'S SIGNATURE.....

DATE.....