

MEMBERSHIP APPLICATION FORM

Name:								
Address:								
Date of Birth: Postcode:								
Email:								
Telephone: Mobile:								
MEMBERSHIP T	YPE							
ADULT		JUNIOR		FAMILY				
🗌 Annual	£150.00	🗆 Annual	£120.00	🗆 Annual	£395.00			
Direct Debit	£150.00	Direct Debit	£120.00	Direct Debit	£395.00			
SENIOR								
🗌 Annual	£120.00							
Direct Debit	£120.00							
If family membership please list the name and date of birth for the additional members.								
Name: Date of Birth:								
Name:	ame: Date of Birth:							
Name:	Date of Birth:							
JOINING FEE (£50)								
Applicable] Not Applicable	🗆 Paid					
PAYMENT TYPE								
□ Credit Card								
 Annual Direct Debit* (Please complete direct debit form) *Direct Debit is available to be paid in monthly instalments to complete a 12 month minimum contract. 								
Yes! I would like to be kept up to date with all the latest members offers $\ \square$								

Date:

Please sign to acknowledge you have read our terms and conditions

OFFICE USE ONLY						
Member Name:			Member Code:			
Member Name:			Member Code:			
Member Name:			Member Code:			
Member Name:			Member Code:			
I	Welcome Pack		4	Issue Membership Card		
2	Sage		5	Staff Introduction		
3	Take Payment		6	File		