***THE CLUB***

*Elletson Street, Poulton le Fylde, FY6*

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| **MEMBERSHIP APPLICATION** |
| **FULL NAME (Mr/ Mrs/Ms/other**  **ADDRESS**  **POST CODE**  **TELEPHONE MOBILE**  **DOB EMAIL** |
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| **PROFESSION/OCCUPATION**  **EMPLOYER NAME & ADDRESS**  **POST CODE TELEPHONE**  **MEMBERSHIP REQUIRED – FULL SOCIAL** JUNIOR  (including 1 Share) (no Share inc) (no Share & adult supervision req)  Are you a previous member? **YES/ NO**  Have you ever been refused a membership at this or any other Club? **YES / NO**  Are you a member of any other Clubs? **YES / NO**  If so, please state which  We are interested in why you chose The Club and would appreciate your comments  Do you know any current or previous members? **YES / NO**  Please enter names of them here |
| **DECLARATION** |
| IF ELECTED, I AGREE TO BE BOUND BY THE RULES & BYLAWS OF THE CLUB, POULTON. Members (over 18) will be entitled to vote at General meetings & other such privileges as described in the Articles of Association |
| **SIGNATURE** |
| **DATE** |
| PROPOSER & SECONDER |
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