

APPLICATION FOR MEMBERSHIP

MEMBER DETAILS:

FULL NAME:

ADDRESS:

.....

POST CODE:

HOME TEL NO:

DATE OF BIRTH:

WORK TEL NO:

MOBILE:

E-MAIL:

OCCUPATION:

EMPLOYER:

MEMBERSHIP CATEGORY APPLIED FOR:

ORDINARY

OFF PEAK

STUDENT/
INTERMEDIATE

JUNIOR

FAMILY

GYM

SOCIAL

SOCIAL RESTRICTED

TEMORARY

SIGNATURE:

DATE:

By signing the above you agree to the terms and conditions of membership at Aberdeen Squash & Racketball Club as outlined in the Club's constitution.

Please complete in full and return to Reception or the address below.