

MEMBERSHIP APPLICATION FORM

CANFORD Sports Centre



YOUR DETAILS

Surname: Mr / Mrs / Ms / Miss

Forenames:

Full address:

..... D.O.B.

Home Tel No: Work Tel No:

Occupation:

If you would like to be contacted by email please provide an email address :

TYPE OF MEMBERSHIP REQUIRED

(Please tick)

| | Individual | F.T. Student | Individual & Partner | Total family of | | |
|----------------------|--------------------------------|--------------------------------|---------------------------------|----------------------------|----------------------------|----------------------------|
| GOLD | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| SILVER | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| SWIMMING ONLY | Adult <input type="checkbox"/> | Child <input type="checkbox"/> | Family <input type="checkbox"/> | | | |

Full Name of Partner: D.O.B.

Occupation:

Child 1: Male / Female D.O.B.

Child 2: Male / Female D.O.B.

Child 3: Male / Female D.O.B.

METHOD OF PAYMENT

Cheque Standing Order Debit/Credit card Cash

Please make cheques payable to "Cheneford Ltd".

I enclose (see fees schedule) £ _____ joining fee(s)
 £ _____ monthly / annual membership fee(s)
 £ _____ Total

Standing Order Mandate form (if applicable)

HOW DID YOU HEAR OF US?

Mail shot Friend's recommendation

Advert Other

I have read and understand the rules and stated overleaf:

Signed: _____ Date: _____

1. All joining fees must be paid immediately. If annual membership fees are paid in a lump sum the joining fee can be included in the same payment. 2. Completed forms and cheques (payable to Cheneford Ltd) to: The Sports Manager; The Canford Sports Centre, Canford School, Wimborne, Dorset, BH21 3AD, Tel: 01202 847524