Hillmorton Road, Rugby, CV22 5AL t: 01788 565339

Membership Application

I ………………………………………………………………………………… (Please print name), wish to become a member of the above club.

Address ………………………………………………………………………………………………………………….

Date of birth …………………………………………

Phone number …………………………………………

Email address …………………………………………..

Proposer’s name …………………………………………………… Membership number …………

Seconder’s name …………………………………………………… Membership number …………

Membership required.

Standard membership £10 plus £3 for new card …………

Over 65 membership £5 plus £3 for new card ………..

Signed …………………………………………………………..

Date ………………………………………

The committee reserves the right to refuse application.