



# APPLICATION FOR MEMBERSHIP

- |  |   |                                   |                                   |
|--|---|-----------------------------------|-----------------------------------|
| FULL <input type="checkbox"/>              | 5 DAY SENIOR (65+) <input type="checkbox"/> | YOUTH 21 <input type="checkbox"/> | YOUTH 26 <input type="checkbox"/> |
| SENIOR (65+) <input type="checkbox"/>      | JUNIOR <input type="checkbox"/>             | YOUTH 22 <input type="checkbox"/> | YOUTH 27 <input type="checkbox"/> |
| COUNTRY <input type="checkbox"/>           | YOUTH 18 <input type="checkbox"/>           | YOUTH 23 <input type="checkbox"/> | YOUTH 28 <input type="checkbox"/> |
| <del>WINTER</del> <input type="checkbox"/> | YOUTH 19 <input type="checkbox"/>           | YOUTH 24 <input type="checkbox"/> | YOUTH 29 <input type="checkbox"/> |
| 5 DAY <input type="checkbox"/>             | YOUTH 20 <input type="checkbox"/>           | YOUTH 25 <input type="checkbox"/> | HOUSE <input type="checkbox"/>    |

1. TITLE ..... FULL NAME .....
2. PERMANENT ADDRESS .....  
.....  
POSTCODE .....
3. HOME TELEPHONE ..... MOBILE .....
4. EMAIL ADDRESS .....
5. DATE OF BIRTH .....
6. OCCUPATION .....
7. PREVIOUS / CURRENT CLUB (if applicable) .....
8. HANDICAP (if applicable) ..... CDH NO. (if known) .....

**If accepted for membership, I will abide by the rules and regulations of the Club and those laid down by the Council.**

**SIGNATURE OF APPLICANT .....**

**DATE .....**