## LISBURN



## REQUEST FOR TRANSFER OF MEMBERSHIP CATEGORY

To:	THE HONORARY SECRETARY	
From:	(Please PRINT name in block capitals)	•••••
In accor	rdance with Club Rule 6, please be a	dvised I wish to
apply fo	or transfer to the following members	ship category:
	(Please state category e.g. Five Day, Veteran, Non-Play	ving, House etc.)
above is	ing this application, I accept that if t s oversubscribed, my name may be p r from which future transfers may b	olaced on a
Regulat	ndertake to make myself fully aware ions and all terms applicable to the c rship for which I have applied.	· ·
(Signature)	••••••	/(Date)
	Approved by Council:	//