## **ALNWICK SQUASH CLUB**

## **APPLICATION FOR GYM MEMBERSHIP**

TITLE & SURNAME		••••••
FORENAMES		
ADDRESS		
•••••	••••••	
	Post Codeemail add	ress
TEL.No.Home	Work	Mobile
	ion for FULL/JOINT GYM MEMBERSHIP he Club rules. I am over 18 years of age. D.C	-
Signature	Date	
Signature of Proposer		Membership No
Signature of Seconder		Membership No
	& Gym Members ONLY can Propose & Sec we the right to refuse membership without as on.	
	nte of Committee Meeting Acceptance nte & Amount Paid:	Membership No:

Please download application form and present completed application in person to Alnwick Squash Club reception