

STAMPERLAND COMMUNITY AND SOCIAL CLUB

APPLICATION FOR MEMBERSHIP

I/We apply to be admitted as a member/s of Stamperland Community & Social Club and agree to abide by the Rules, Constitution and Decisions of the Committee

First Applicant

FIRST NAME _____ **SURNAME** _____

Second Applicant

FIRST NAME _____ **SURNAME** _____

ADDRESS _____

_____ **POST CODE** _____

TEL NO _____ **DATE** _____

SIGNATURE _____

SIGNATURE _____

Joint Applicants both **MUST sign**

All Applicants **MUST be over 18 years of age**

E-Mail Address (if applicable) _____

We certify that the above named Associate applicant/s is/are personally known to us.

1st Proposer	2nd Proposer
Address	Address
Fob No	Fob No

Membership Fee Paid £ _____ **Fob Number Allocated**

NOTE: Associate Applicants MUST be Proposed and Seconded by Resident Members only.

Resident Applicants do NOT require to be proposed or seconded.

PLEASE WRITE LEGIBLY