Hampton-in-Arden Sports Club
Squash and Racketball Section

Application for Membership / Renewal of Membership 2016/17

(All new & renewing members must complete this form which, together with payment, constitutes your membership for the year to key day Sept 2017)

Surname (Mr/Mrs/Ms/Miss/Dr)	
Forename(s)	
Address	
Post Code	
Telephone Numbers	Home:
	Business:
	Mobile:
e-mail	
Date of Birth (if under 26 or over 65)	
Any medical conditions that the club or Coach may need to be aware of	
Membership Type	Peak / Off Peak / Family / Couple / OAP / Corporate / Other
Other Sporting Membership	Tennis / Hockey / Cricket
Fee Due	
Method of payment	Cash / Cheque / Card / Bank Transfer / Standing Order / Other
Details of other family/corporate members associated with this membership (if corporate please include company name)	
Name of previous club	
England Squash No.	if known
Leagues (please tick)	Squash Racketball

I wish to become a member of Hampton-In-Arden Sports Club Limited and hereby agree, if accepted, to abide by the rules of the Club. I recognise that there is a potential liability of £5 should the club be wound up.

I give my permission for my membership details to be held on computer and for those contact details to be available on the club website to other members with an authorised password. If I have provided my e-mail address above, I agree that the club may send me notices for Annual and Extraordinary General Meetings, league information and general notices.

Signature: (parent/guardian if appropriate) ……

Date: ……

Paul Cockerill Membership Secretary 2016/17 pcockeri@gmail.com 07881234513