

# WILSDEN SQUASH CLUB MEMBERSHIP APPLICATION

**MEMBERSHIP TYPE** (Please TICK the appropriate box)

<input type="checkbox"/>	Trial 3 Months (Adult only)
<input type="checkbox"/>	Single Adult
<input type="checkbox"/>	Junior (Under 16)
<input type="checkbox"/>	Intermediate (16 to 21 in full time education)
<input type="checkbox"/>	

**CONTACT DETAILS**

**SURNAME** \_\_\_\_\_

**FORENAME** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**POSTCODE** \_\_\_\_\_

**MAIN PHONE NUMBER** \_\_\_\_\_

**ALTERNATE NUMBER** \_\_\_\_\_

If you are joining as a **SINGLE JUNIOR** or **INTERMEDIATE** member **DATE OF BIRTH**     /     /

**STAFF USE ONLY**

**ACCEPTED BY** \_\_\_\_\_     **DATE**     /     /

**FEE PAID**     £ \_\_\_\_\_

**NUMBER OF KEYS ISSUED** \_\_\_\_\_