

Stratford Squash Club Membership Application Form

Personal Information

Title	Mr/Mrs/Miss/MS
First Name	
Surname	
Address	
Post Town	
Post Code	
Telephone	
Mobile	
EMAIL	
Date of Birth (if Under 18)	
Full Time Educational Establishment	
Education Finish Date	
Parental Name/Address If under 16	

Membership Category

Please circle the one Required

Please refer to the club website www.stratfordsquashclub.co.uk for information about membership and benefits of categories

Senior Peak	Senior Off Peak	Under 18 Off Peak	Full Time Education Off Peak	Social	Parental Social	Parental Saturday Only
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Please obtain the Subscription from the Subscription Calculator Webpage

Application/Payment Method

I would like to pay by cheque and with the application form I enclose a cheque for £ payable to Stratford Sports Club - Squash Section.

I would like to pay £ by bank transfer from my account to :
(In which case either post or EMAIL your application form)

Payee	Stratford Sports Club - Squash Club
Sort Code	40-43-19
Account Number	01471457
Reference	Please put your name as an identification

I would like my membership to commence on

I wish to apply for the above membership and should I be accepted would abide by the club rules.

Signature

Date

How did you hear of us ?

Applications to :
Ian Fradgley
92 Banbury Road
Stratford upon Avon, CV37 7HY
EMAIL jeni@92ban.freeserve.co.uk
Tel 01789 266369

For Office Use
Membership Number
Membership Database
Group EMAIL
Welcome Letter
Bookit Account
Club Admin/Salto Card
Key Fob/Car sticker
Bank
Dave

If you have never been a member of the club or have not been a member since 31st March 2010 then if you are being introduced, as a senior peak member, by an existing member under the members incentive scheme then please give the name of that member.