

Rivets Sports & Social Club Whitehead Way, Aylesbury, Bucks, HP21 8AD **E-Mail:** admin@rivetsportsandsocialclub.co.uk **Tel:** 01296 424824

Membership Application Form

Please complete the following form in CAPITALS if you wish to become a member of the club. All sections must be fully completed before being handed to a member of the committee or club steward.

Print Name:		Date Of Birth:	
Address:		Contact Details:	
		Telephone No: (Optional)	
		E-Mail: (Optional)	
Membership (Please Circle)			Amount Paid
FULL SEN	IIOR *	JUNIOR	
*To be eligible for senior membership you must be receiving your state pension			
Applicants Signature	Proposed by: (Print Name)		
	Please note: To propose a new member, you must have been a fully paid-up member of the club for at least one year.		
Date:		Membership Number:	
		l :	
Please read the PRIVACY POLICY on the reverse of this form and sign to confirm that you have ead the policy and give your consent for your personal details to be used and stored as stated therein.			
Signed:			
Membership Application Receipt			
Name:		Date:	
Amount Paid:		Authorised by:	

Please retain this slip as your temporary proof of membership until your application has been processed and approved. A membership card will then be issued.