

MEMBERSHIP FORM

TITLE: MR MISS MS MRS OTHER					HOME ADDRESS 1:		
FIRST NAME:					HOME ADDRESS 2:		
MIDDLE NAME:					HOME ADDRESS 3:		
LAST NAME:					HOME TOWN/CITY:		
TELEPHONE NO (HOME):					POSTCODE:		
TELEPHONE NO (MOBILE):					EMAIL:		
DATE OF BIRTH:					DISABILITY AND/OR HEALTH CONCERNS YES□ NO □		
GENDER: FEMALE ☐ MALE ☐					IF YES PLEASE STATE:		
					JB / PREVIOUS CLUB: B NUMBER (JE APPLICABLE):		
CURRENT AGB NUMBER (IF APPLICABLE):							
I AGREE TO ENFIELD ARCHERS RULES AND REGULATIONS FOR SAFETY AND ETIQUETTE							
PRINT NAME		SIGNATURE		DATE			
APPLICANT							
Additional information							
CLUB MEMBERSHIP IS £120 PER YEAR (ADULT)							
 ▶ PLEASE SPEAK TO THE SECRETARY IF THE APPLICATION IS FOR A STUDENT OR PERSON UNDER AGE 18 ▶ ALL CHEQUES TO BE PAYABLE TO 'ENFIELD ARCHERS' 							
BANK TRANSFER DETAILS ON REQUEST							
PLEASE RETURN COMPLETED FORM TO:							
CLUB SECRETARY							
97, Marmion ave Chingford							
E4 8EJ							
OR ATTACH TO EMAIL: SECRETARY@ENFIELDARCHERS.CO.UK							
FOR CLUB USE ONLY:							
DATE OF MEMBERSHIP							
APPLICANT APPROVED BY							
USERNAME C	N BLOG						
GNAS NUMBER							