'CHURCHILLS'
PRIVATE MEMBERS CLUB

4a Desborough Road, Eastleigh, SO50 5NX
Tel: 02380 612451
Email: info@churchillsclub.co.uk

MEMBERSHIP APPLICATION FORM

Name: _____ Age: _____ Contact Number: _____

Address: _____

_____ Post Code _____

Occupation: _____ E Mail: _____

Joint Name: _____ Age: _____ Contact Number: _____

Address: _____

_____ Post Code _____

Occupation: _____ E Mail: _____

1) Proposed by: _____ Membership No: _____

2) Proposed by: _____ Membership No: _____

Are you / have you been a member of any other club? _____

Name of Club(s) (if applicable): _____

State reason for leaving (if applicable): _____

I declare that I agree with the objects of the above-named club and hereby make application to be admitted as a member.

I agree to be bound the Rules and Byelaws of the club. Signed:_____

_____

FOR OFFICE USE ONLY

Membership Application Fee £10 per person Received: £_____

Single Membership Fee payable on acceptance £25 per year Received: £_____

Joint Membership Fee payable on acceptance £38 per year Received: £_____

Conservative Club Affiliation Card/s £3.50 per person per year Received: £_____

Member of Staff / Committee Member accepting application (print name) _____

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Name: _____	Name: _____