



# KINGTON ST MICHAEL CLUB & INSTITUTE LTD

1 2 KINGTON ST MICHAEL, CHIPPENHAM, WILTSHIRE, SN1 4 6JB.  
TELEPHONE: 01249 750336

## MEMBERSHIP APPLICATION FORM

Name: _____	Name: _____
Address: _____	Address: _____
Postcode: _____ D.O.B: _____	Postcode: _____ D.O.B: _____
Telephone: _____ Mob: _____	Telephone: _____ Mob: _____
Email: _____	Email: _____
Occupation(s): _____ Existing Member Y/N	Occupation(s): _____ Existing Member Y/N

PROPOSER: \_\_\_\_\_

Signed: \_\_\_\_\_

Membership No. \_\_\_\_\_

SECONDER: \_\_\_\_\_

Signed: \_\_\_\_\_

Membership No. \_\_\_\_\_

The Proposer and Secunder must have been members of the Club for at least six months. If an existing member then Proposer and Secunder not required.

The appropriate Membership Fee must accompany this form. This fee gives the applicant membership until 31<sup>st</sup> December 2021. The applicant becomes a Temporary Member until the Committee ratifies the application and a membership card is issued.

### PLEASE CIRCLE TYPE OF MEMBERSHIP REQUIRED

Single: ..... £12

Family membership (couple + their children aged under 16): ... £20

Concession (over 60): ..... £10

Junior (16 - 17 years): ..... £7

Skittles Team: ..... £100

### General Data Protection Regulation (GDPR)

Kington St Michael Club understands that your privacy is important and we will only use the information provided above to contact you if required or in other ways that are useful to you. Kington St Michael Club will securely store your information for the duration of your membership. Please tick the box to confirm your consent for us to do this.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

*By signing you are agreeing to abide by the Club's Constitution, which you will receive when your membership has been ratified by the Committee.*