MARK HALL & NETTESWELL COMMUNITY ASSOCIATION Registered Charity No. 301280

MEMBERSHIP APPLICATION FORM

DATE:	
FULL NAME:	Mr/Mrs/Miss/M
ADDRESS	
	POST CODE
TELEPHONE NO	DATE OF BIRTH
MEMBERSHIP GROUP/ACTIVI	TY
In order to comply with legal requirement proposed and seconded by a full member	nts of the Moot House Social Club Ltd you need to be r of the Club.
	Signature Dership No.
(Memb Note: we advise members of the Associa	Signature Dership No.) ation to wait one week after completing this form to ficers of the Association who will sign below.
Name S	ignature Date
Name S	ignature Date
Key Card No. Issued	
Declaration by Members, whose applica	tion has been proposed, seconded & duly approved.
Please tick box if a Taxpayer \Box	Please tick box to opt out of Gift Aid (Gift Aid is reclaimed by us from the Taxman)
	(full name) declare my concurrence with and set down in the club rules (& any subsequent
Signed	Date
	eswell Community Association is a registered user of a this form will only be used by the Association's Officers

computer data. The information provided on this form will only be used by the Association's Officer and employees in the conduct of Association business and will not supply to outside bodies. Any member wishing to check information held about him/her should apply in writing to the Hon. Secretary.

MSHIP FORM