**Weston super Mare Croquet Club**

I wish to apply for Associate membership of Weston super Mare Croquet Club.

My details are as follows (please use capital letters):

|  |  |
| --- | --- |
| First Name |  |
| Family Name |  |
|  |  |
| Address |  |
|  |  |
|  |  |
|  |  |
| Postcode |  |
|  |  |
| Telephone |  |
| Mobile |  |
| email |  |

|  |  |
| --- | --- |
| Nominated by |  |
| Approved by  |  |

My current handicap(s) are \_\_\_\_ at Golf Croquet and \_\_\_\_ at Association Croquet.

I apply for a Associate membership to Weston super Mare Croquet Club. Please make payment by electronic transfer: Bank details are: **Weston super Mare Croquet Club**, Lloyds Bank

Sort code 30-98-97 Ac No 59837162 or by cheque to the Treasurer, James Doulton.

My primary club is ............................................. I am a Standard member of the CE...............

I agree that on becoming a member of the club the personal data relating to me will be held both manually and on a computer by Weston-super-Mare Croquet Club and I agree to those details being published in the form of a Member’s Address/Contact List available to all members.

Signature Date

Should any applicant have an objection they may write to the Chair who will delete their details from the files.

Please send your completed application form to the Chair: Pauline McAllister, 24 Lower Kewstoke Road, Worle, BS22 9JF .

**Subscription for Associate members for 2024 ………………………………£134.00**