

Juvenile Member

Membership Application



Please Print Clearly In BLOCK CAPITALS! Return this form to:-

The Club Reception Desk,
at the Founders Hall,
University of Bath.

*Or, if this is not convenient, by post to: The Treasurer,
Bath Sword Club,
'High Orchard,'
2 Bloomfield Drive,
Bath BA2 2BG.*

Your Details:

Name: Gender: M/F

Address:
.....
.....
.....

Post Code School:

BFA No: Date of birth:

Weapons fenced (F/E/S): Previous experience:

Health

Please describe any health problems or medical conditions which the Club should be aware of and which may require special treatment:

Parents Details

Names:

Tel: (day): Tel: (evg): Tel: (mob):

Email:

Membership **Session: Senior / Junior**

Standing Order commences:

I have received and understand the Safety Rules of the Club

Parent's Signature Date:

Juvenile Member

Bath Sword Club



STANDING ORDER MANDATE

Please Print Clearly In BLOCK CAPITALS! Return this mandate to:-

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Your Account Details:

Bank: Sort Code:

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Full Bank Address:
(Inc. Post Code)

Account Name:

Account Number:

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Your tel. No. (day):

Please set up the following Standing Order and debit my/our account accordingly

Pay the sum of **£15 (FIFTEEN POUNDS ONLY)** on the **FIRST of EACH MONTH**

(commencing) until further notice to:

Bank: **Alliance & Leicester Commercial Bank plc**
Sort Code: **72 00 02**
Beneficiary: **Bath Sword Club**
Account No.: **40 57 87 08**

Quoting reference (member's name if different to account holder's):

Confirmation

N.B. This order is to supersede that for £..... payable to the same account (Delete if not applicable).

Signature or Signatures of a/c holder/s: