

Student 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
Tel: (day): Tel: (evg): Tel: (mob):
Email:
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:

Membership

Type: Senior / **Student** / Reverse Student

Standing Order commences:

I have received and understand the Safety Rules of the Club

Signature

Date:

Student Member

Bath Sword Club



STANDING ORDER MANDATE

Please Print Clearly In BLOCK CAPITALS! Return this mandate 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,'
Bloomfield Drive,
Bath BA2 2BG.

Your Account Details:

Bank: Sort Code:

--	--	--	--	--	--

Full Bank Address:
(Inc. Post Code)

.....

Account Name:

Account Number:

--	--	--	--	--	--	--	--

Your tel. No. (day):

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

Pay the sum of **£14** (FOURTEEN POUNDS ONLY) on the **FIRST** of EACH MONTH

(commencing) until further notice to:

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

Quoting reference (the 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: