MEMBERSHIP APPLICATION & RENEWAL FORM 2021/22

**If your details have not changed from last year, please add a cross here …………… and you will only need to fill in your membership type, name, email address and summary of fee section below.**

PLEASE CIRCLE MEMBERSHIP REQUIRED (see membership list) AND YOUR SPORT PREFERENCE.

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| FULL | FAMILY | | DAYTIME | SOCIAL | | STUDENT | | BADMINTON | | SQUASH | TABLE TENNIS |
| TITLE: | | SURNAME: | | | | | FORNAME: | | | | |
| EMAIL: | | | | | | | TEL NO: | | | | |
| ADDRESS: | | | | | | | | | | | |
| POSTCODE: | | | | | D.O.B: | | | | REG DISABLED: YES NO | | |
| **EMERGENCY CONTACT DETAILS – Name: Tel No:** | | | | | | | | | | | |

**SECOND ADULT MEMBERSHIP:**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| FULL | FAMILY | | DAYTIME | SOCIAL | STUDENT | | BADMINTON | SQUASH | TABLE TENNIS |
| TITLE: | | SURNAME: | | | | FORNAME: | | | |
| EMAIL: | | | | | | TEL NO: | | | |
| ADDRESS: | | | | | | | | | |
| POSTCODE: | | | | D.O.B: | | | REG DISABLED: YES NO | | |
| **EMERGENCY CONTACT DETAILS – Name: Tel No:** | | | | | | | | | |

JUNIORS (up to 18) An additional form is required for each Junior Member – available from the Office

|  |  |  |  |
| --- | --- | --- | --- |
| SURNAME | FORENAME | D.O.B | SPORT (indicate) |
|  |  |  | Badminton Squash T/Tennis |
|  |  |  | Badminton Squash T/Tennis |

# Summary of fee (to be completed by member):

|  |  |  |  |
| --- | --- | --- | --- |
| MEMBERSHIP FEE | DOOR ENTRY FOBS AT £5 (new members only) | DONATION (See Gift Aid declaration below if applicable) | TOTAL PAYMENT DUE |
| £…………………………. | £…………………………. | £………………………… | £………………………….. |

PAYMENT – please circle/mark CASH

CHEQUE - Please make cheques payable to LBSC

BACS - Details: HSBC Account: Littlehampton Badminton & Squash Club Sort Code: 40-28-23 A/C No: 41418750. Please give a reference showing your surname and first letter of your forename e.g., “SmithA” and enter the payment date below.

*Please note we are* ***not*** *accepting card payments for membership fees*

Declaration: I/We, as the applicant/s, acknowledge that upon my/our membership being accepted/renewed the full subscription is due and payable on 1 September, or the date of acceptance of membership. I understand all memberships expire on 31 August each year. I agree to abide by, and take responsibility for all the above applicants abiding by, the Rules and By-Laws of the Club, as published from time to time.

Donation and Gift Aid: I wish to make a donation of £ to Littlehampton Badminton & Squash Club (LBSC). I am a UK taxpayer. I wish LBSC to reclaim tax on all donations I make from 6 April 2021 and thereafter. I have paid sufficient tax to cover any Gift Aid claimed.

BY SIGNING THIS FORM YOU ARE AGREEING TO OUR DATA POLICY. Your data will be kept on our database, and a hard copy will be held in our files, for 2 years. You agree to us using your email to keep you informed of club activities and set you up with access to our online booking system. Other than for these purposes we will never pass on any of your details to a third party.

When your form is completed and signed, please send, email or hand it in to us either in the office or to the bar along with payment. If paying by BACS, please enter the BACS date below. Emailed forms can be sent to the email shown below.

# Signed: Date: BACS date (if applicable)

Littlehampton Badminton and Squash Club, Sparks Court, Littlehampton, West Sussex, BN17 5ES,

01903 713217 – [www.littlehamptonbadmintonandsquashclub.com](http://www.littlehamptonbadmintonandsquashclub.com) – [enquiries@littlehamptonbadmintonandsquashclub.com](http://www.littlehamptonbadmintonandsquashclub.com/)