



MEMBERSHIP APPLICATION FORM



NEWHAVEN SPORTS

One year _____ one month _____

YOUR DETAILS

Name: _____

Address: _____

Mobile telephone number: _____

E-mail address: _____

Age: _____

Date of Birth: _____

Terms and conditions

- I agree to use the range in a responsible nature and to adhere to club rules.
- I understand that health and safety is paramount at the club.
- I understand that I use and frequent the range strictly at my own risk.
- My membership runs for one calendar year from the date of joining.
- Members will be issued with a door entry card loss of this must be reported immediately and you will be charged £5.00 for a replacement.
- I agree to abide by the club's safety regulations at all times.
- The Club retains the right to alter, change or add to its terms and conditions.

(Official use only) Membership number assigned: _____ Date _____

Door entry card issue YES / NO

Signed: _____ Print name: _____

Club membership fee is £125