

Sale Sports Club Application for Membership (Juniors)



Please use BLOCK CAPITALS

Child's Name			Male / Female		
Name of			Relationship to		
Parent/Guardian			applicant		
Address					
			Postcode		
Email					
Home Tel		Mobile			
Date of Birth		School			
Section Applying For: (please tick) Cricket Tennis Hockey					
Medical Information					
Please give details of any relevant allergies/medical conditions/medication:					
Please state any further relevant information (e.g. special dietary requirements):					
. lease state any farther relevant information (e.g. special aletaly regulierital).					
Emergency Contact Additional Emergency Contact					
Name		Name			
Relationship		Relationship			
Contact Tel. Numbers		Contact Tel. Numbers			
By returning this comp	leted form and ticking the bo	xes below:			
I confirm that I have read and agree to comply with the code of conduct and conditions of membership					
for Sale Sports Club available on the club website and notice board.					
Lunderstand that th	nere is no charge for junior memb	nershin hut I w	vish to make a Gift A	Aid donation to the Club to	0
I understand that there is no charge for junior membership, but I wish to make a Gift Aid donation to the Club to help the Junior Section. I am a UK taxpayer and expect to pay tax of at least the amount that the Club will claim from					
HMRC on my donation.		•			
Payment:					
Amount Paid: £	· 				
Payment method: WebCollect (DD) ¹ Cash Cheque ² Credit/Debit Card Online Transfer ³					
1 webcollect.org.uk/salesc					
2 Cheques made payable to Sale Sports Club 3 Online transfers payable to Sort Code: 72-00-03 Account No: 77995487 (include your name in the payment reference)					
3 Online transfers payable to Signature of Parent/0	I	7995487 (inclu		Dayment reference)	
	manual I				