

WESTON-SUPER-MARE PETANQUE CLUB

MEMBERSHIP APPLICATION FORM

Please print

First name _____ Surname _____

Date of Birth _____ In full time education. **Y/N**

Home Address _____

Postcode _____

Email address _____

Tel. No's Mobile/Landline _____ / _____

Petanque England membership number (if applicable) _____

Emergency contact name _____

Relationship _____ Tel. No. _____

Applicants Signature _____ Date _____

Introduced by _____ Signature _____

Please email to:- info@wsmpetanqueclub.co.uk

or hand to a committee member or member at the Sea Gardens Piste.

Club use only

Date first joining _____ Membership No. _____

Fee received £ _____