



Senior membership form

We are pleased to welcome you to our club, membership is open to all members of the community Please insert the information requested and return to address at foot of page

PERSONAL DETAILS

Name		
Address		
Postcode	Tel Number:	Mobile
Email		
Date of birth	Place of birth	
Male <input type="checkbox"/>	Female <input type="checkbox"/>	
If you are or have been a member of another club please give details below		
Club	Date of resignation	

MEDICAL INFORMATION

Please give details of any important information that our coaches should be aware of(e.g.epilepsy,asthma,diabetes,etc)

Medication:

EMERGENCY CONTACT DETAILS-

Contact name Contact number

Name Signature Date:

SUBSCRIPTION AS OF SEPTEMBER 2009 £25.00

Subscription paid Date Proposed URN _____
 Seconded LPS _____
 Coach

Please make cheques payable to **Liverpool Pembroke & Sefton H&AC**