

# Watton Sports Association and Social Club

<b>Full Name Mr/Mrs/Miss</b>			
<b>Address</b>			
<b>Postcode</b>			
<b>Telephone No</b>	<b>(Home)</b>		<b>(Work)</b>
<b>E-Mail Address</b>			
<b>Date of Birth</b>			

## ADULT MEMBERSHIPS

<b>Association Only</b>	<b>£15.00</b>	<input type="checkbox"/>
<b>Fitness Centre and Association</b>	<b>£28.00</b>	<input type="checkbox"/>

## PLEASE SIGN THE APPROPRIATE SECTION

### ALL APPLICANTS

All applicants may be asked to provide suitable proof of age and I.D.  
I have read and accept the conditions of membership and consent to abide by them.

Signed.....Date.....

### FOR FITNESS CENTRE APPLICANTS

I have read the Watton sports centre Health & Safety policy and conditions of membership and consent to abide by them. I have undertaken an induction and received appropriate instruction from a qualified member of staff. I have also completed a Medical Questionnaire.

Signed.....Date.....