



## Holiday Village Leisure Suite

### Private Membership Application / Renewal\* Form

\*delete as appropriate

Member Surname \_\_\_\_\_

Member Forename \_\_\_\_\_

Address \_\_\_\_\_

Telephone No. (Day) \_\_\_\_\_ (Evening) \_\_\_\_\_

Email Address \_\_\_\_\_

tick if you would like to be given updates on Share via email

#### Additional Member Names (included in Membership Fees)

Name	Relationship	Date of Birth (If under 18 years old)

#### Membership Category (Please Tick)

- Single Adult       Couples       Youth (16-18)   
 Youth (5-15)       Child (under 5)       Registered Disabled   
 Registered Disabled (Under 18)       Family (2 + 2 Under 15)

I/We would like to become members of the Share Leisure Suite in accordance with the set Terms and Conditions. I enclose full payment of £\_\_\_\_\_ /Direct Debit Mandate Form\* (\*Delete as appropriate) along with a non refundable joining fee of £\_\_\_\_\_.

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

Office Use Only      Joining Fee £ \_\_\_\_\_      Membership Amount £ \_\_\_\_\_

Method of Payment \_\_\_\_\_ Direct Debit No. \_\_\_\_\_ M'ship No. \_\_\_\_\_

Validity Period      From \_\_\_\_\_ To \_\_\_\_\_