

Membership Application Form

Please add your photo
here

Name:

Date of Birth:

Address:

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E mail:

Contact Number:

Name & Number of next of Kin:

Please tick the membership level you wish to apply for:

Adult: £45 per annum

Youth (under 18): £35 per annum

Family (1 adult & 2 children): £60 per annum

Day Rate: £5 for card then £6 per day – payable on day with membership card

I hereby agree to abide by the rules & regulations of The Sacred Archery Society and enclose a cheque for the sum of £

Signed:

Date:

Please return your completed application form to: The Sacred Archery Society, Croydon Branch, 75 Northwood Avenue, Purley, Surrey, CR8 2ES

Cheques should be made payable to "Sacred Archery Croydon"