

Wall's Club Ltd Office
Unilever UK Ice Cream
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Gloucester, GL4 3BW
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Wall's Club barnwood
Social - Sports - Corporate - Dining

MEMBERSHIP APPLICATION FORM

This form is for application to become either an Associated or Affiliated Club Member of Wall's Club Ltd (For Non-Employees of the Company- Minimum age for Membership - 18 Years)

Please write clearly

Mr/Mrs/Miss First Name..... Surname.....

Home Address.....

Post Code.....

Home Tel No..... Mobile No.....

Email Address.....@.....

Age..... (If over 21 state over 21)

Affiliated Team Name (if applicable).....

Please fill in the team name if you are applying membership to play for one of the Club's resident football or skittle affiliated teams.

I wish to apply for Membership of the Wall's Club in consideration of which I agree to pay the annual membership fee £5.00 per person. Please complete this form and send it along with a cheque made payable to Wall's Club Ltd to the address above or hand it in to the Club during normal opening hours.

I further agree that, if elected to Membership, I will not abuse the facilities and amenities afforded by the Club and will, at all times, observe and comply with the rules and bylaws of the Club. A copy of the Club Rules are available on request.

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

Note: The completion of this application form **does not automatically grant Membership**. Membership is granted at the discretion of the Management Committee, and if the application is approved a separate communication will be sent to your home address.

I do not wish to receive any information about promotions through the post

I do not wish to receive any information about promotions via email

You will only receive information regarding Club events or Club catering. We will not pass your details on to 3rd parties.

Where did you hear about us?

Barnwood Local Elmbridge Local Longlevens Local Citizen

Internet Word of mouth

Poster (if so where?).....

Other.....