



ADULT SUPPORTING MEMBER APPLICATION FORM

I, the undersigned, being a parent, guardian of an existing club member or other supporter, wish to become an Adult Supporting Member of Mid Sussex Marlins Swimming Club Ltd

.....
(FULL NAME – BLOCK CAPITALS)

.....
(Nature of connection to club – eg Parent)

I undertake to pay the membership fee of £5.00 prior to the Annual General Meeting on 12 September 2019. This will entitle me to vote at the meeting and any subsequent adjournment thereof.

Payment should be made by BACS transfer to the club's bank account:

Sort code : 09-01-28

Account number: 28574939

Quoting your name as reference.

Or in cash upon entry to the AGM.

Signed

Date

COMPLETED APPLICATION FORMS MUST BE RETURNED TO THE CLUB BY THURSDAY 12 SEPTEMBER via the Club Manager clubmanager@midsussexmarlins.org or in person to the Secretary, Tom Forcier on the night.