



2, Montpelier Parade  
CHELTENHAM GL50 1UD  
Tel: 01242 541121

## MEMBERSHIP APPLICATION FORM

Type of membership applied for: Single/Joint (delete as appropriate). In applying for membership I **consent**, if accepted, to The New Club holding my personal data and contacting me by post, email or telephone as appropriate.

**Name(s) of candidate(s)**

**Address**

**Date(s) of Birth**

**e-mail Address**

**Occupation(s)**

**Telephone Nos.  
Home:**

**Work Address**

**Work:**

**Mobile:**

**Name & Signature of Proposer**

**Name & Signature of Seconder**

**Remarks of Proposer (continue overleaf, if necessary)**

**Date of application:**

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For office use only.

Date of posting:

Date of election:

Type of membership: