

MEMBERSHIP APPLICATION FORM

Membership No:

hlac.co.uk	Document Version 1.4		
NAME:			
ADDRESS:			
			POSTCODE:
			DATE OF BIRTH:
EMAIL ADDRESS:			
MOBILE TEL. NO:	BILE TEL. NO: HOME TEL. NO:		
ТҮРЕ	ANNUAL FEE	TOTAL AMOUNT	MEMBERSHIP TYPE
FULL SENIOR	£25.00		We will send you a digital membership by ema
FAMILY *	£30.00		only.
JUNIOR CONCESSIONARY **	£7.50 £20.00		Paper memberships are at the bottom of this document.
** UNE	ADDITIONAL	LES MEMBER + SPOUSE + CHILDREN OF U~16YRS P AP, DISABLED, (
	PLEASE NOTE	E YOU MAY BE ASKED T	O PROVE STATUS
		FOR CLUB USE ONLY	
DATE RECEIVED:	FEE RECEIVED: £		
RECEIVED BY:	PHOTO RECEIVED:		
MEMBERSHIP TYPE:	MEMBERSHIP BOOK ISSUED:		
PLEASE SEND M	EMBERSHIP FEES AN	D APPLICATION FORMS	TO THE MEMBERSHIP SECRETARY
I	Rules and Policies ca	n be found online on ou	ır website - https://hlac.co.uk
	MEMI	BERSHIP I	FORM
Date:	Name:		
Address:			
			Postcode:
Membership type:			Membership No:

Detach this bottom slip below the cut line above and keep if posting

Fee Sent: