



Fishbourne Tennis Club

RENEWAL Application for **Adult Membership** 1st April 2024 to 31st March 2025

1st Applicant

First Name	<input type="text"/>
Surname	<input type="text"/>
Mobile	<input type="text"/>
Email	<input type="text"/>

2nd Applicant

First Name	<input type="text"/>
Surname	<input type="text"/>
Mobile	<input type="text"/>
Email	<input type="text"/>

Please ✕ the appropriate box(es) if you do **NOT** want these
Email **OR** Telephone numbers to appear in the Members' list

Email	<input type="checkbox"/>	Tele:	<input type="checkbox"/>
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Address	<input type="text"/>
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Post Code	<input type="text"/>	Telephone	<input type="text"/>
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I/We wish to renew my/our Adult Membership of the Fishbourne Tennis Club.

★ **Important** : I have read and accept the **FTC Data Privacy Policy**.

Signed	<input type="text"/>	Signed	<input type="text"/>
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Age group? (optional) Please ✕	Under 30	<input type="checkbox"/>	30-45	<input type="checkbox"/>	45-60	<input type="checkbox"/>	Over 60	<input type="checkbox"/>
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Annual Subscription 2024-25 £150 per Adult

Online payment preferred to: **SORT CODE 09-01-53 ACCOUNT No. 33095480**
SURNAME and INITIAL as Reference, please.

Cheques should be made payable to **FISHBOURNE TENNIS CLUB**

I/We have paid (please ✕)	Online	<input type="checkbox"/>	By Cheque	<input type="checkbox"/>	Amount	£ <input type="text"/>
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Whichever method of payment you use, your **FORM must be RETURNED by POST or Email** to:
Ivor Smith, Membership Secretary, Maple End, Watery Lane, Funtington, W Sussex PO18 9LF
Email: fishbournetennis@gmail.com