

RECREATIONAL FACILITIES MEMBERSHIP APPLICATION FORM

Category of membership applied for:



GYM



POOL



COURT



FULL MEMBERSHIP

NAME OF APPLICANT (Please underline surname): _____

NAME OF SPOUSE: _____

PROFESSION/DESIGNATION: _____

NAME OF ORGANISATION: _____

BUSINESS ADDRESS: _____

RESIDENTIAL ADDRESS: _____

EMAIL: _____

MOBILE: _____

DURATION OF MEMBERSHIP: ONE MONTH THREE MONTHS SIX MONTHS ONE YEAR

MEMBERSHIP APPLIED FOR: SINGLE COUPLE CHILD

Children's Names:

I HEREBY APPLY FOR MEMBERSHIP AND AGREE THAT I WILL ABIDE BY THE RULES AND REGULATIONS OF THE RESPECTIVE RECREATION FACILITIES OVERLEAF. IN THE EVENT OF FAILURE TO DO SO MY MEMBERSHIP MAY BE CANCELLED IMMEDIATELY, AND NO CLAIM FOR REFUND OF MEMBERSHIP FEE, NOT EVEN IN PART WILL BE MADE BY ME.

Signature of: APPLICANT _____

SPOUSE _____

-----Rules and fees are subject to change without notice-----

FOR HOTEL USE ONLY

MEMBERSHIP CARD NO: _____ CASHIER SIGNATURE: _____

DATE APPLIED: _____ RECEIPT NO. _____

DATE PAYMENT RECEIVED: _____