

***Friends of Cinderford Town Football Club Membership Form***

\*Official Use Only\*

Date: ………../…………/………….

Membership No. ……………..

Suffix: …………………..

First Name/s: ………………………………… Surname: ……………………...

Postal Address: …………………………………………………………………..

………………………………………………………………………………………Postal Code: …………………… Contact Number: …………………………

Email Address: …………………………………………………………………..

Date of Birth: ……………../……………/………….

Membership (Please Tick)

* Junior Supporter (Up to 16 Years of Age) - £5 per season
* Adult Supporter - £15 per season

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Applicant Signature Club Official Signature

………………………. ………………………….

 Date: ………../………../………..

**Please return completed electronic forms to grahambevan1@hotmail.co.uk**

Membership Fee can be paid in cash at the Causeway along with a completed membership form or via BACS

Account Number: 81475134 Sort Code: 40-17-24