

Surname..... Forename(s)..... Title.....  
 Date of Birth (year optional) .....  
 Home Address .....  
 ..... Postcode.....  
 Telephone: Home.....  
 Mobile ..... Email .....

Partner's Surname ..... Forename(s) ..... Title.....  
 Partner's Date of Birth (year optional) ..... Relationship.....  
*(If Joint Membership)*  
 Child's Name..... Date of Birth..... Age.....  
*(If Family Membership. Proof of age may be required. If more than 2 children, please continue overleaf)*  
 Child's Name..... Date of Birth..... Age.....

**TYPE OF MEMBERSHIP APPLIED FOR:-**

<b>SINGLE MEMBERSHIP</b>	Classic/Deluxe/Off Peak/Summer	£
<b>JOINT MEMBERSHIP</b>	Classic/Deluxe/Off Peak/Summer	£
<b>Child's Membership</b>	Classic Turtle/Deluxe Turtle/Terrapin	£
<b>JOINING FEE</b> <i>Only applicable to New or Lapsed Memberships</i>	Single/Joint/Off Peak	£

As Parent / Guardian of the above named children I agree to ensure that they abide by the Club Rules

Delete as applicable:-

I enclose my Cheque payment of £ ..... (Cheques made payable to Tormage Ltd)  
 For security reasons we do not ask members to give us their Credit/Debit Card details, therefore those wishing to pay by Card must bring this form in to the centre and be present to make the payment.  
 Those who wish to take up our easy pay option must also complete a Direct Debit form.

**Emergency Contact:** Please enter below the name, address and telephone number of a relative or a friend whom we should contact in the event of an emergency .....

How did you hear about us?

Member referral  Advertisement  Hotel  Social Media  Other  Please state.....

Please keep me informed of any special offers or deals from the Heritage Leisure Group.

*Please note we NEVER pass your details to 3rd Parties*

**Declaration**

I wish to apply for Membership of "Reflections" for myself and any partner or children as detailed above and declare that I have read, understood, and agree to comply with, the valid Conditions of Membership and Centre Rules.

Signature..... Date.....

**OFFICE USE ONLY**

Introduced By..... Membership Number..... Membership Expiry date.....