WHKF MEMBERSHIP APPLICATION

SURNAME ……………………………………………………………………………………………………

FIRST NAME ……………………………………………………………………………………………………

ADDRESS ……………………………………………………………………………………………………

 ……………………………………………………………………………………………………

POST CODE ……………………………………………………………………………………………………

TELEPHONE …………………………………………………………………………………………………….

MOBILE ……………………………………………………………………………………………………

EMAIL …………………………………………………………………………………………………….

FAMILY MEMBERS …………………………………………………………………………………………

(to be included for Club insurance)

 …………………………………………………………………………………………

 …………………………………………………………………………………………

Fees for 2024-25

Annual membership runs from November.

Adult member …………………………………………… £20

Additional family member …………………………………………… £7

Overseas member …………………………………………… £10

Cheque payable to WHITE HORSE KITE FLYERS

Or by BACS to Lloyds Bank Account number 65069768

Sort code: 30-99-66

Please note: the information you supply will be stored on The Club database for the sole purpose of contacting you on Club business and will not be divulged to any third party unless required to do so by the authorities.

For further information please contact us via Facebook personal messaging.

Signed …………………………………………………….. Date …………………………………………………..