



CLUB DG ONE
Membership

DUMFRIES & GALLOWAY COUNCIL
CLUB MEMBERSHIP APPLICATION FORM



Membership No: _____

PERSONAL DETAILS (BLOCK CAPITALS PLEASE)

Mr/Mrs/Ms/Miss Forename Surname

Date of Birth:

Address:

Postcode:

Tel (H):

Mobile:

Tel (W):

Email:

Dumfries & Galloway Council may wish to share the information you supply to its other departments. If you do not wish to share this information you have supplied, please tick

MEMERSHIP DETAILS

Membership Type:	Club	Annual	Direct Debit	Direct Debit Payment Date	3rd	18th
<i>please circle</i>	Prime	Annual	Direct Debit	Direct Debit Payment Date	3rd	18th
Home Site:	Eskdale	Moffat	Newington	Lochmaben	Lockerbie	DG One
	Hillview	FUN Pool	Ryan Centre	Merrick Centre	CD Pool	

Joining Date:

Annual Membership fee: £

Direct Debit New Start Payment: £

First Direct Debit Due Date:

Rolling Direct Debit Fee: £

Monthly payments will be made on or around this date thereafter until you give notice in writing to the Centre to terminate (30 days prior to next direct debit)

I agree to the terms and conditions as stated on the front and back of this issued agreement:

Signed by Member: **Date:**

Signed by Staff Member on behalf of Dumfries & Galloway Council: **Date:**

Receipt Number: **Membership No:**

INSTRUCTION TO YOUR BANK OR BUILDING SOCIETY TO PAY BY DIRECT DEBIT

Name and full postal address of your Bank or Building Society

To: Bank/Building Society:

Address: Postcode:

Banks/Building Societies may not accept Direct debit Instructions for some types of Accounts

Name(s) of Account Holder(s)

Originator Identification Number

6	0	1	0	9	5
---	---	---	---	---	---

Account Number Branch Sort Code

