



## MEMBERSHIP FORM

APPLICANT INFORMATION	
Name:	
Address:	
Postal Address (If different from above):	
Phone:	Mobile:
Email:	
Emergency Contact:	Relationship:
Phone:	Mobile:
Any medical conditions we should know about:	
ANNUAL MEMBERSHIP FEE - \$30 PER PERSON	
Payment can be made by cash, cheque or direct credit to:	
<p><b>Account Name:</b> Coffin Club Hawke's Bay</p> <p><b>ASB Bank:</b> 38-9018-0608568-00</p> <p>If banking direct please put your name as the reference.</p>	
DISCLAIMER	
<p>I agree to participate in this club on the understanding that the Club representatives will take every effort to maintain a safe environment for it's members.</p> <p>Approved supervisors in the workshop do not take responsibility for the personal Health and Safety for the Club Members.</p> <p>The DIY Coffin Club and committee take no responsibility for the loss or damage of any personal items taken to or from the Club premises.</p>	
AUTHORISATION	
Signature of applicant	Date
<p>THE COFFIN CLUB HB – 707 Sylvan Road, Parkvale, Hastings (Formerly Hastings Netball Centre and Clubroom)</p> <p>Workshop is open every Tuesday from 9am-12pm</p>	
OFFICE USE ONLY	
Member No:	Date Payment Received: