

New Member Application Form

Please complete your details as applicable, then sign and date. Thank you.

Full Name	Preferred Name						
Address							
Town/City	County		Post Code				
Telephone Number		Mobile N	Mobile Number				
Email Address							
BN Number (if applicable)			How may we contact you? Email: Phone: Text: Post:				
		Ryedale Naturist Club and if elected agree to be bound by orce or as amended by a general meeting. Application Date					
Any prospective member must att If you feel you are not able to achieve apply and the o	end at least 3 swim session	ne a member ther	please contact	us as exten	uating cir		
Men	nbership Fees						
Full vear Sin	gle Membership £16.00)	Enro		Single	Couple	
Full year Cour	ples Membership £22.0			Oct, Nov	£16.00	£22.00	
(Reduced pro-rata	a as the membership year progresses)			Jan, Feb Apr, May	£12.00 £8.00	£16.50 £11.00	
[*] Full annual fee payable but this wo	ould cover a 15, 14, or 13 month pe	eriod respectively.		Jul, Aug [*]	£16.00	£22.00	
	completed Membership F heques should be made pa Sorry but we do no	ayable to Ryedal	e Naturist Club.		e swim.		
Membership cards will be available	at the swim or please pro	vide a stamped a	addressed envel	ope if you	would pr	efer it posted.	
Website: ww	vw.ryedalenaturistclub.co.	<u>uk</u> Email: <u>i</u> nfo@	Pryedalenaturis	<u>tclub.co</u> .ul	k		

Membership Details Updated:

Membership Number: