



Confidential New Membership Application Form

Primary Contact

Title: Mr Mrs Miss Ms Other:

Forename:

Surname:

Date of Birth:

Address:

Postcode:

Telephone Number:

Snowsports

Skier Snowboarder Instructor N/A

Disability:

Subscription

Snowsports Individual £36
 Junior (15 and under) £21
 Full time student £26
 Pensioner £26

Volunteer Individual £26
 Full time Student £21
 Pensioner £21
 Local Group only £10

Life Membership Individual £500

Family Membership Family £51

Family membership please complete next section

Full name	DOB	Disability (if applicable)	Relationship to main contact



Confidential

New Membership Application Form

Are you a member of a local group? Yes No

If yes, which local groups are you a member of?

- 1.
- 2.
- 3.

Do you hold a position within the local group?

Organiser Chairperson Secretary
Treasurer
 Safety Organiser Instructor Helper DBS
ID checker

Method of payment

- Direct debit – please complete direct debit form and return
 Cheque – please make all cheques payable to Disability Snowsport UK
 Credit/debit card – please call 01479 861 272

Signature (or type if filling in electronically):

Date: