

Exmouth Town Supporters Club

Membership Application Form

Title (Mr/Mrs/Miss/Ms/Dr):							
Full Name:							
Membership Type:		Male] Fe	emale		Multiple
(All members should be 18 years o single payment reference.)	r older.	Multiple memb	pership is ap	plicabl	e for two or mo	ore members	s to be paid with a
Other Members:							
(Only applicable for multiple meml	bership)						
Address:							
Email:							
(We require your email address so you on our news, events, merchand		-			-	-	bution and update
Other Members Email:							
(Only applicable for multiple member	ship.)						
Donation Type:		Monthly		<u> </u>	Annual		
(Please give an indication of how mucindividual membership. Multiple men	-	_				n is £2 per m	onth (£24 annually) for
Payment Reference:							
(We require a bank payment reference Surname. however, it does need to be							
Agreement:		I/We conse Town Supp	-		_	and used l	by the Exmouth
(This agreement means that you have	read an	d accept the info	ormation con	tained	within the ETSC	policies and ι	inderstand your rights.)
Signature:							

Please see policy information on Exmouth Town Supporters Club website at https://mufftowncasuals.online/