 MEMBERSHIP APPLICATION FORM 2016/17

*For the full terms and conditions of Crawley Town Supporters Society Limited (trading as* ***Crawley Town Supporters Alliance****) please contact the Membership Officer at Membership@*[*ctfcsa.co.uk*](http://ctfcsa.co.uk) *or visit our website* [***www.ctfcsa.co.uk***](http://www.ctfcsa.co.uk)***.***

*Please complete all sections of the form in* ***BLOCK CAPITALS*** *and send it, along with your membership fee, to****Crawley Town Supporters Alliance, Checkatrade.com Stadium, Winfield Way, Crawley, West Sussex, RH11 9RX.***

***Note:* Completed forms can also be *taken to the CTSA Cabin on match days! All members MUST complete an Application Form. Please advise how you wish to receive your Membership card. Post/Collect from the Cabin. Delete as appropriate.***

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| A: MAIN APPLICANT INFORMATION: |

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| --- | --- | --- | --- | --- |
| Surname: |  | First Name: |  | |
|  | | | |
| Address |  | | | |
|  | | | |
|  |  | | | |
|  | | | |
| Post Code: |  | Contact Tel No: (Mobile no. preferred) |  | |

**Note: If you have an email address, please print it carefully below. This will be used as the preferred form of contact from the Alliance**.

|  |  |
| --- | --- |
| Email address: |  |

|  |  |
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| B: MEMBERSHIP TYPE: | |
|  | |
| **£5.00**  **Membership** (Individual) – **Same price for all supporters.**  For season 2016/2017, **CTSA Membership** will be one price for every supporter. If you purchase the Club’s Loyalty Scheme Card, membership of the Crawley Town Supporters’ Alliance is included in that package.  **Only over 16’s have voting rights with their membership.** |
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| C: PAYMENT: |

***Please make cheques payable to “Crawley Town Supporters Alliance”***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Total cheque payment enclosed: | £ |  | Total cash enclosed:  (Please don’t send via post) | **£**£**££** |

C

Via PayPal – Email address: travel@ctfcsa.co.uk

£

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| D: DECLARATION: |

I wish to become a member of ***Crawley Town Supporters Alliance*** in accordance with its rules.

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| --- | --- | --- | --- |
| Signed: |  | Date: |  |

Your address, email and phone number will not be passed to any other organisation or individuals From time to time with your permission we would like to send you information regarding CTSA and Crawley Town Football Club.

**If you don’t want to receive this information, please tick the box**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| *E: OFFICIAL USE ONLY:* | | | | | |
| *Date Application Received:* |  | *Membership Number:* |  | ***Membership verified & Issued By:*** |
|  | | | | |
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