

**GLAXOSMITHKLINE SPORTS AND SOCIAL CLUB**

Strathmore Road, Barnard Castle, Co Durham. DL12 8DT

Telephone: 01833 692921/692144

**APPLICATION FORM FOR ASSOCIATE MEMBERSHIP 2011 ONWARDS**

The correct fee and 1 x recent **passport photograph** must be forwarded with this application. In the case of joint applicants a **photograph** is required of **both applicants**.

Cheques should be made payable to GSK SSC.

**Please complete this form in BLOCK LETTERS**

<b>Personal Details</b>	<b>First applicant</b>	<b>Spouse (for joint applicants)</b>
Title Mr/Mrs/Miss/Ms		
Surname		
Forname(s)		
Address		
Post Code		
Date of birth		
Home tel no:		
Mobile tel no:		
Email address		
Are you currently employed? If yes, by whom?		
Are you currently banned from licensed premises under the Pub Watch Scheme?		

<b>Type of membership applied for (please tick)</b>			<b>Fee</b>	<b>*Fee</b>
			<b>Full Year</b>	<b>Half Year</b>
A	Spouse	Husband or wife of a voting member	£9.00	£4.50
B	Adult	Over 18 years	£15.00	£7.50
C	Junior Over	16 years but under 18 years ( See condition 5 overleaf)	£9.00	£4.50
D	Joint Adult	Married couples/co-habitees	£23.00	£11.50
E	O.A.P	Over Statutory retirement age (Male/Female 65)	£9.00	£4.50
F	Joint O.A.P	Both over Statutory retirement age (Male/Female 65)	£13.00	£6.50

**\*PLEASE NOTE: THE HALF YEAR FEE IS FOR PERIOD 1 JULY TO 31 DEC AND ONLY APPLIES TO NEW CLUB MEMBERS JOINING AFTER 30 JUNE. THE FULL YEAR'S FEE TO BE PAID THEREAFTER.**

**PROPOSER/SECONDER - IMPORTANT - THIS APPLICATION MUST BE PROPOSED AND SECONDED BY TWO VOTING MEMBERS ONLY.**

*Voting members are permanent GlaxoSmithKline employees who are Club members (F) or Honorary (H) members.*

***Associate members cannot support this application***

	<b>Full Name</b>	<b>M/ship No:</b>	<b>Signature</b>	<b>Relationship</b>	<b>Date</b>
Proposer		F/H			
Secunder		F/H			

Continued overleaf

Reasons for application – please give details

**Social**

**Sport**

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If you wish to join a Section(s) – please tick below

50's 60's Music	Fitness Suite/Gym (need to complete gym application and submit relevant fee).	Squash (additional fee £7.50) Squash Application form to be submitted to request this.	
Country Music	Badminton		
Family Night	Bar Games		
Saturday Dance	Archery		
Sequence Dance	Tommy's Keep Fit		

**Membership Conditions**

1. Any Associate member who wishes to resign from the Club shall give seven days notice, in writing, to the Club Administrator.
2. Any associate member who resigns will not be eligible for re-admission for a period of two years unless good and sufficient reasons are given and accepted by the General Management Committee
3. Associate members shall not be eligible to vote at the Club General Meetings unless representing a formal Club Section. Associate members may not sit on the Executive Committee but may vote and sit on the Sports, Social and individual Section Committees and generally enjoy all the facilities of the Club.
4. A maximum of two Associate members may be elected to the General management Committee and may vote at the meetings of that Committee.
5. Any application for Junior membership must have parental consent and an undertaking, by the parent, to make good any damage or injury caused by the junior member.
6. No applicant for any category of membership shall have membership granted unless a period of 48 hours has elapsed from the date of application. Applications will be posted on a notice board in the Clubhouse for 48 hours prior to an approval meeting.

A copy of the Club rules and regulations (The Constitution) is available from the Club Administration office on request.

**Declaration**

I agree to abide by the rules and regulations of GlaxoSmithKline Sports and Social Club

	1 <sup>st</sup> Applicant	2 <sup>nd</sup> Applicant
Signature(s)		
Date		

In the case of a Parent signing for a Junior Applicant (please read condition 5 above)

Parents name	
Signature	
Date	

Once completed this form should be submitted to the Club Administration office together with the **correct fee and 1 x recent passport photograph**. Subject to condition 6, above, the application form will then be put before the relevant Committee for approval. The applicant will be notified within five working days of the result. No reason for refusal need be given.

**Office use only**

Date application received		Fee enclosed	Yes/No
Date of application to board		Photo enclosed	Yes/No
Date to be processed		Proposer Check	√ X
Approved	Yes/No	Secunder Check	√ X