

Please complete where applicable in BLOCK CAPITALS

Name of Club / Individual:

Type of Sport:

Contact Person:

 Position:

Address:

 Post Code:

E-mail address:

Telephone No:

 Mobile No:

UNDER-NOTED FOR COMPLETION BY CLUBS ONLY:

| | | | |
|---------------|--|-----------------|--|
| Adults – Male | | Adults – Female | |
|---------------|--|-----------------|--|

| | | | |
|----------------|--|------------------|--|
| Juniors – Male | | Juniors - Female | |
|----------------|--|------------------|--|

Where and when does your Club meet?

Are you / Is your Club affiliated to your National Sports Governing Body? **YES / NO**In which league (if appropriate) do you / does your Club compete?

Name of Club coach (if any)

Address:

Telephone No:

Coaching qualification held:

AFFILIATION FEES
(per year)**Club: £25****Adult (17 years and over): £20****Junior (16 years and under): £15**

I enclose a cheque for £_____ made payable to Wigtownshire Sports Council.

I agree to abide by the Constitution of Wigtownshire Sports Council and any rules which may from time to time be made by Wigtownshire Sports Council and by any amendments thereto.

Signed:

Name (block capitals):

Date:

Forms should be accompanied by affiliation fee and returned to:-

Ms Jane McDowall, Secretary, Culroy Cottage, Glenluce, Newton Stewart, DG8 0LE

Tel: 07717 758 638

E-mail: wigtownshiresports@gmail.com

Web: wigtownshiresportscouncil.co.uk**Wigtownshire Sports Council**