



# SURBITON PROBUS CLUB

*When completed please  
return to:*  
  
Colin Palmer  
10 Moresby Avenue  
Surbiton, KT5 9DS  
Tel: 020 8399 6945

## MEMBERSHIP APPLICATION FORM

**Please complete in BLOCK CAPITALS**

Surname ..... Date of Birth .....

Forenames .....

Preferred Name (if not first forename) .....

Address .....

..... Post Code.....

Home Tel. No. .... Mobile Tel. No. ....

Your Contact Email address .....

I would like to become a member of Surbiton Probud Club. Before I retired, or partially retired, my profession or  
business was .....

I agree with the objects of the Club, which are:  
"To foster fellowship and goodwill among its members and to engage in other  
activities, neither political nor sectarian, as members shall agree"

I have no objection to the Membership Secretary and General Secretary keeping the above personal  
information on a data retrieval system, provided that it is not communicated to any person who is not a member  
of Surbiton Probud Club.

Signature: ..... Date .....

Proposer: ..... Signed: .....

Seconder: ..... Signed: .....

*It would be helpful if you would give, on the back of this form, brief details of your career, hobbies and interests  
together with the name of your spouse / partner, where appropriate, (for use with invitations etc.)*

Date of Admission .....

*ProbudMembershipForm*