



EDINBURGH DEAF SPORTS & SOCIAL CLUB  
49 Albany Street  
Edinburgh  
EH1 3QY

## EDSSC MEMBERSHIP APPLICATION

2007 - 2008

NAME(S)	ADDRESS (INCLUDING POSTCODE)

MEMBERSHIP REQUIRED	COST	PLEASE TICK
ADULT	£12.00	<input type="checkbox"/>
OAP	£8.00	<input type="checkbox"/>
ASSOCIATE MEMBER (eg. Hearing or living outside area)	£12.00	<input type="checkbox"/>
YOUTH MEMBER	£8.00	<input type="checkbox"/>

I/We enclose a cheque for £_____ (payable to EDSSC)	Date _____
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Official use only

Date paid: \_\_/\_\_/\_\_

Membership No: \_\_\_\_\_

Membership sent: \_\_/\_\_/\_\_

Signed: \_\_\_\_\_