



MEMBERSHIP APPLICATION FORM

Office use only

Exp Date _____

Card No _____

Data base

Name _____

Name (2nd Applicant) _____

Address _____

Tel: _____

Mobile: _____

Date of Birth ____/____/____

Date of Birth (2nd Applicant) ____/____/____

Email Address _____

For Family Membership

Childs Names _____ Childs Names _____

Please Tick the appropriate membership type

GYM & POOL

12 Month

6 Month

3 Month

1 Month

SINGLE	€450 <input type="checkbox"/>	€320 <input type="checkbox"/>	€170 <input type="checkbox"/>	€65 <input type="checkbox"/>
COUPLE	€675 <input type="checkbox"/>	€480 <input type="checkbox"/>	€255 <input type="checkbox"/>	
Student	€320 <input type="checkbox"/>	€235 <input type="checkbox"/>	€140 <input type="checkbox"/>	
Senior Citizen	€240 <input type="checkbox"/>			
Senior Citizen Couple	€360 <input type="checkbox"/>			

POOL ONLY

No concessions for gym or aerobics available with this membership

12 Month

6 Month

3 Month

1 Month

SINGLE	€270 <input type="checkbox"/>	€200 <input type="checkbox"/>	€130 <input type="checkbox"/>	€50 <input type="checkbox"/>
COUPLE	€400 <input type="checkbox"/>			
FAMILY	€550 (2+2) <input type="checkbox"/>			

Age Category 17-25 26-40 41-54 55-64 65+

First time member Renewal of membership

Signature _____

Comments _____