

NORTHAMPTONSHIRE



RAPTOR CLUB

Membership Form.

SURNAME.....FIRST NAME..... D.O.B

ADDRESS..... POST CODE

TEL.NO. E MAIL

Secondary Member Name*DOB.....

Child (under 16) Name*DOB.....

TYPE OF MEMBERSHIP:- Cheques made payable to: **Northamptonshire Raptor Club**

Full Member £30 Full Family Membership £50

Associate £20 Junior FREE (under 16 years only)

Number of Raptors kept - -
Registerable Hawks/Falcons/Owls** Non Registerable Hawks/Falcons/Owls**

Premises where kept

I/We hereby apply to join the Northampton Raptor Club and agree to abide by the rules as stated in the rules and codes of conduct leaflet which I/We have read.

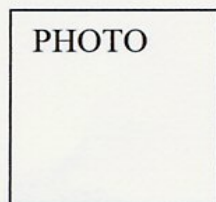
Signed Date
Proposed BySeconded By.....

*Family membership only
** Delete as Applicable

OFFICE USE ONLY

Membership Number

Date..... Valid until..... Fee.....



Return this form to: The Secretary, Northamptonshire Raptor Club, 5 Main Road, Hackleton, Northampton, NN7 2AB. E-mail – N Raptor Club@aol.com