

CHELSEA

SUPPORTERS CLUB –MALTA



MEMBERSHIP/RENEWAL FORM 2010 / 2011

Expiring on 31st May 2011

DETAILS OF MEMBER (ADULT OR JUNIOR)

Name: _____ I.D. Card No: _____

Address: _____

_____ Town: _____ Post Code: _____

Date of Birth: _____ Phone: _____ Mobile: _____

Occupation: _____ E-mail: _____

I would like to enrol as a member of: **CHELSEA SUPPORTERS CLUB – MALTA**

One year Membership:

LOCAL **ADULT** MEMBER: €15

LOCAL **JUVENILE** MEMBER: €5

Three year Membership:

LOCAL **ADULT** MEMBER: €40

LOCAL **JUVENILE** MEMBER: €15

This form must be returned with the appropriate fee to:

The Membership Secretary:

Chelsea Supporters Club – Malta, 32, Doris Flat 2,
Imstierah Street, San Gwann SGN 2320

MAKE CHEQUES PAYABLE TO:
CHELSEA SUPPORTERS CLUB – MALTA

I agree to abide by the rules and constitution of the Chelsea Supporters Club – Malta

Signature: _____ Date: _____

FOR OFFICIAL USE ONLY

Date JOINED / PAID: _____

Membership No: _____ Issued by Signature: _____

The Chelsea Supporters Club (Malta) will store your personal data contained on our database for the purpose of sending informative material like the Club Newsletter and other announcements. Kindly inform us should you not wish to receive any informative or promotional material from the Chelsea Supporters Club (Malta). You retain your right to access, rectify and, where applicable the right to erase data which is being processed as aforesaid. However, kindly inform the Chelsea Supporters Club (Malta) of any alterations relating to your personal data which is being processed. The club undertakes to implement appropriate measures and safeguard for the purpose of protecting the confidentiality, integrity and availability of data process.

THIS RECEIPT IS TO BE GIVEN TO THE MEMBER

CSCM ENROLMENT/RENEWAL - OFFICIAL RECEIPT

This is to certify that: _____ I.D. Card No: _____

Has paid his/her Membership Fee on: _____

Received By: _____ Signature: _____