



Dorchester Town FC Supporters Club

FIVE SEASON MEMBERSHIP FORM

Please fill in below and return this application form to:

DORCHESTER TOWN SUPPORTERS' CLUB. 39 Thatcham Park, Yeovil, Somerset. BA21 3BP

Name: _____

Address: _____

Email: _____ **Contact tel. no:** _____

Please tick membership type below. If Junior please state age.

Adult **OAP** **Junior (under 16)**

Second person at same address: _____

Please tick membership type below. If Junior please state age.

Adult **OAP** **Junior (under 16)**

Third person at same address: _____

Please tick membership type below. If Junior please state age.

Adult **OAP** **Junior (under 16)**

Total number of annual adult memberships required at £20 each: _____

Total number of annual child/OAP memberships required at £20 each: _____

Additional donation towards the DTSC's work: _____

Please make your cheques or postal orders payable to **DORCHESTER TOWN SUPPORTERS' CLUB**

Total: £ _____