

**ROYAL PIGEON RACING ASSOCIATION
THE REDDINGS, CHELTENHAM.
GLOS GL51 6RN**

MEMBERSHIP FORM

I hereby apply for membership of the Royal Pigeon Racing Association. I acknowledge that I have received a copy of the Rules which I have perused and I agree be to bound by same

Date thisday of

Name

Address

.....

.....

.....Post Code.....

Date of Birth

Telephone No.....

Mobile No.....

Email.....

This form, when completed, must be returned together with a £8.00 subscription to the Secretary of the Region of the Royal Pigeon Racing Association whose name and address is set out in the attached letter. Please enclose an s.a.e with your application.

Thank you

CERTIFICATE

(Delete paragraph 1 or 2 as necessary)

1. I have not previously been a member of any Racing Pigeon Association or Union.
2. My previous membership was with :

.....Association/Union

In the following Organisations :

ORGANISATION

DATES FROM:

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3. I certify that I am NOT a suspended or expelled member of any Recognised Association/Union.

Date

Signature

Region