

St. Crispin's Bridge Club



Membership Application

	Title	le First Name			Family Name					
Name:										
Address:										
County:										
Post Code:										
email:					@					
Tel:										
CBAI Number:			CBAI Grade:							
Other Clubs:									1	
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Signature:							Date:			
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Proposer: Seconder:				Signature: Signature:						
Jeconder.				Jigilature.						
For new players	only:									
Date of Classe	s:			Teacher:						