

**THE SALISBURY CLUB
272 MILL ROAD
CAMBRIDGE
CB1 3NF
TEL: (01223)248734**

To the Committee of the Salisbury Club.

Dear Committee,

I hereby apply for membership of the above Club. I understand if elected, that subscriptions are due from 1st January each year.

Name in full (Block Capitals) _____

Address _____

_____ Post Code _____

Phone No _____

Email _____

Date _____

Name of member referring applicant.

Name (Block Capitals) _____

Please Note: This application is subject to 6 month probation period and can be rescinded at any time during that period.

Regards
Salisbury Club
Committee