



**SPOT
WHITE**

MEMBERSHIP APPLICATION FORM

CONTACT DETAILS

First Name

Surname

Address (1st Line)

Postcode

Gender

Date of Birth

Mobile

Email

Place of Work

You could be eligible for a free membership and free workplace nights out!!

Are you interested in?

Tournaments Cue Shop

Signature

Members agree to adhere to the published rules and regulations of Spot White

For Office Use Only

Date

Type Fee Paid £

Entered on System (tick) Membership Number

WWW.SPOTWHITE.COM