

Dear Sir

APPLICATION FOR ASSOCIATE MEMBERSHIP

I wish to apply for Associate (Family) Membership of the Strathclyde Police Recreation Association and can meet the requirements of membership as contained within the Association's Constitution and Rules, viz:

I am the * Son/ Daughter, Brother/Sister, Parent of an Ordinary/Life or Associate Member.

* Delete as appropriate

If elected I agree to abide by the Constitution and Rules of the Association.

I enclose the appropriate fee (£12.50)

NAME:	.....	NAME OF ORD/LIFE/ ASSOCIATE MEMBER
ADDRESS:	.....	.....
	.....	REG/REF NO.
	
POST CODE	.....
OCCUPATION	.....
DIV/DEPT	.....
DATE	.....

APPLICATION MUST BE SIGNED BY TWO ORDINARY MEMBERS

The applicant is known to us and we would ask that the application be considered by the Association's Executive Committee in keeping with the Constitution and Rules.

PROPOSER:	.....	REG NO:	SIGNATURE
SECONDER:	.....	REG NO:	SIGNATURE

Note: completed application should be forwarded with the appropriate fee to the SPRA Offices, 6 Baird Street Glasgow G4 0EZ. Cheque made payable to 'SPRA'