

Membership application form

Please complete and return to: The Fox Club London, 46 Clarges Street, London, W1J 7ER

Title:

First name:

Surname:

Date of birth:

Nationality:

Marital status:

Occupation:

Business address:

Tel:

Fax:

Email:

Home address:

Tel:

Fax:

Email:



Where would you prefer your mail to be sent to:	Which type of membership are you applying for:
Business <input type="checkbox"/>	Bar <input type="checkbox"/>
Home <input type="checkbox"/>	Overseas <input type="checkbox"/>
	Club <input type="checkbox"/>
	Corporate <input type="checkbox"/>

I hereby apply for Membership of The Fox Club London. I agree to be bound by the rules of the Club and any by-laws made or to be made in accordance therewith and to pay such joining fee and subscription as the rules should require. I am over eighteen years of age.

Signed: Date:

How did you hear about us?

Method of payment received by the Club:

Cheque* ☐ Credit card ☐ Cash ☐

Credit card details

Start date:

Expiry date:

Security code:

*Cheques made payable to Fox Fabs Ltd