NUMBER

DONCASTER ROVERS SUPPORTERS CLUB

Membership form

I wish to be enrolled as a member of the above club and I agree to abide by its Rules.
(PLEASE USE BLOCK CAPITALS)

BRANCH (Please Tick one Box)

MAIN	
RETFORD	
NORTH DONCASTER	

NAME:

TITLE:

MR	
MRS	
MISS	
OTHER	

ADDRESS:

P	O	S	T		C	O	D	E				*				*	*

Emergency contact telephone No 1	

Emergency contact telephone No 2	

(Must be filled in for U18'salong with consent to travel form)

Consent form signed and received	

ADULT £7	
Concessions £5	

If posting, send to Mr L.South 29 Ennerdale Road, Wheatley Hills, Doncaster DN2 5QR with appropriate fee.

Cheques made payable to Doncaster Rovers Supporters Club.

The Supporters club will be unable to take under 16's to away games unless accompanied by a responsible adult.

I confirm that I agree to abide by the rules and constitution of the Supporters club an uphold the good name of Doncaster Rovers Football Club.

All your details are secure and will not be shared by any third party in line with GDPR

Signed .....