



Community '10' Card Application			Date of application:	
Club / Group Name:				
Club / Group Type:	Sporting <input type="checkbox"/>	School <input type="checkbox"/>	Charity <input type="checkbox"/>	Other <input type="checkbox"/>
(If Other please give details)				

Contact Details	
Club / Group Address:	
Home Ground / Meeting Place:	
Primary Contact Name:	
Mobile Number:	
Email:	

Event Co-ordinator Name:	
Mobile Number:	
Email:	

*Our Function Manager, Laura, will be in touch to speak to you about how the Club may assist in any of your function needs*

Information / Background	
Club / Group established (year):	
Tell us a little about your Club / Group:	
Total Number of individuals associated with your group:	
Players / Participants	
Parents / Guardians	
Families	
Officials / Managers / Committee Members	
Volunteers	

Club Kilsyth Office Only:			
Manager approved:	Account Number:	Date:	
Number of Cards required:	Premium:	Temporary:	
Notes:			