

JUMP OR ZIP DATE & VENUE

Membership No. & Expiry Date



BOOKING FORM / MEMBERSHIP APPLICATION

FULL NAME: _____

ADDRESS: _____

TEL: _____ **MOB:** _____

EMAIL: _____

OCCUPATION: _____

DATE OF BIRTH: _____

I apply for membership to the club and agree to be bound by its rules.

SIGNED: _____

DATE: _____

Please fill in the above application form, starting jump date and venue. Return it to us with your payment of £20. We will then send you your membership card, which you must bring on the day of the jump.

The cost of the jump on the day, is £30

EXTREME SENSATIONS BUNGEE CLUB

13A Horse Market, Barnard Castle, Co. Durham DL12 8LY

TEL: 01833 695773 or 07792 460123

info@extremesensationsbungee.co.uk

www.extremesensationsbungee.co.uk