

SPORTS CENTRE PARKING APPLICATION FORM

PLEASE COMPLETE THIS APPLICATION FORM FULLY IN BLOCK CAPITALS

Surname	Title	Forename	Gender	Date of Birth
Address				
			Postcode:	
Email Address:				
Proxy Disc No. (on the reverse of your membership card)				0000

Reason for request (please tick one):

Sports Club Concessionary Member	<input type="checkbox"/>	Pond Cottages Resident	<input type="checkbox"/>
Therapist Associate	<input type="checkbox"/>	Personal Trainer	<input type="checkbox"/>
Other:			
If "Other" please give reason (e.g. registered disabled, hirer carrying equipment, injury or illness etc):			

Sports Centre Parking Conditions:

1. If approved your access card will be authorised to operate the barrier until 31st August. Access will cease automatically at the end of this period and must be renewed.
2. Vehicles must not be parked on Pond Cottages (private road) or the yellow-hatched areas under any circumstances for safety reasons.
3. You will be issued with a permit letter for your vehicle which must be carried in the vehicle at all times.
4. Failure to comply with the above conditions may result in parking authorisation being withdrawn.

I wish to apply for Sports Centre parking authorisation for my vehicle as below and accept the conditions of use.

Make/Model _____ Reg. No. _____

Signed _____ Date _____

For office use only

Authorised	<input type="checkbox"/> Y/N	Sports Manager	<input type="text"/>
Start Date	<input type="text"/>	Expiry Date	<input type="text"/>
Access Level Updated (date)	<input type="text"/>	Initials	<input type="text"/>
Parking Permit Issued (date)	<input type="text"/>	Initials	<input type="text"/>