



MEMBERSHIP APPLICATION FORM

Please complete the details below, in all relevant sections. If any members of your immediate family, i.e. partner/spouse and children, are also taking out membership of the Trust their details should be included on this form. Each member will be assigned a unique Adult or Junior membership number. By completing this application form you are applying for **Life Membership** of the **LIVforLIFE Supporters Trust**, and are agreeing to abide by the Trust's Rules and Regulations.

Membership fee is £5 for adults, £1 for juniors and concessions. Corporate membership is £100. Payment must accompany the Membership Form. Cheques should be made payable to **LIVINGSTON FOR LIFE**. If you are paying by post, the completed form plus payment should be sent to **LivforLife Trust, c/o 1 Leving Place, Elburn, Livingston EH54 6ST**. Please note that it may take up to 3 weeks to fully process your application. *Information on this form will be used for LFL Trust purposes only.*

Type of Membership applied for - Adult only Junior only Joint application (Adult and Junior) Corporate

APPLICANT/S DETAILS (including BUSINESS NAME if applying for Corporate Membership)

Main Applicant Surname _____ First Name _____ Mr/Mrs/Ms/Other _____

Address _____

Postcode _____ Home Tel _____ Mobile _____

Email _____ Occupation _____

If your partner/spouse and/or your children are also applying for membership of the Trust, please fill out their details in the spaces below.

PARTNER OR SPOUSE (if applying for membership)

Surname _____ First Name _____ Mr/Mrs/Ms/Other _____

Email _____ Occupation _____

DEPENDANT CHILDREN (if applying for membership)

Name _____ D.O.B. _____ Age _____ Name _____ D.O.B. _____ Age _____

Name _____ D.O.B. _____ Age _____ Name _____ D.O.B. _____ Age _____

OTHER INFORMATION

Please indicate here if you are a Season Ticket holder/s at Livingston FC (tick one) **Yes** **No**

Would you like to be added to our list of volunteers who assist at Trust events, fundraisers and meetings? **Yes** **No**

The following information will help us minimise our print and postage overheads. Please tick one of the following -

I prefer to receive the Trust Newsletter and other information by email and email attachments/downloads (e.g. PDF files)

I have limited internet access and prefer to receive the Trust Newsletter and other information by post

MEMBERSHIP FEE AND DECLARATION

I/we wish to become a member/s of the **LIVforLIFE Supporters Trust** (trading as *Livingston Independent Supporters Society Limited*) in accordance with its rules.

I/we enclose the total membership fee required.

MEMBERSHIP (Total) £ **SIGNED** **Date**

Additional adult signature

OFFICIAL USE ONLY

Date received _____ Payment received YES/NO Balance due £ _____ Membership nos