

MEMBERSHIP FORM

Title:	Surname:	
First Names:		
Address:		
Home Phone no:	_ Mobile no:	
Work Phone no:	_ E mail Address:	
Handicap:	Umpire Grade:	
Membership Type		
Membership Fee		
HPA Membership Fee		
(See below for Membership and HPA Fees, please enter as appropriate)		
Total Fee payable:		
Signature:	Date:	
(Please make cheques made payable to Binfie	eld Heath Polo Club)	



Binfield Heath Polo Club DECLARATION

I, ______ of hereby

agree to be bound by the Rules, Regulations, Orders, Articles and Directives from _me to

_me in force of Binfield Heath Polo Club and of the Hurlingham Polo Association.

Signed: _____ Date: _____

Membership Fees (Exclusive of HPA)

Туре	<u>Amount</u>	
Full	£1500	
Grooms	£750	
Professionals	£400	
Second Club (may not use BHPC as main club; may enter tournaments as club member)	£TBC	
Chukka	£750	
(Discount for family members will be considered on application)		

HPA Fees

<u>Type</u>		Amount
FULL Membership	UK Residents Overseas Residents	£150 £300
JUNIOR Membership	UK Residents Overseas Residents	£65 £65
CHUKKA Membership	UK Residents Overseas Residents	£120 £180
DAY Membership	UK Residents Overseas Residents	£30 £65