

Club Lick

Membership Application

*Card No: _____

First Name: _____

Last Name: _____

First Name: _____

Last Name: _____

Address: _____

Address: _____

Post Code: _____

Email Address: _____

Telephone No: _____

Mobile No: _____

*ID Type: _____

*ID Checked: _____

*Date (dd/mm/yyyy): _____

* Official Use Only

Disclaimer

I / WE the undersigned agree to abide by the regulations of the club. I / WE have read the regulations and agree to comply with them all. I / WE understand that membership is not guaranteed and is at all times subject to approval of the current club manager.

I / WE agree to indemnify the club and each individual member of the club against any personal breach of confidentiality. I / WE understand that I / WE will be liable to each individual member of the club should I / WE breach any confidentiality. I am / WE are not a member of the press or working independently with the press.

I am / WE are attending this club in a private and individual capacity, purely for my own enjoyment. I am / WE are not offended by nudity or any acts of freedom of sexual expression.

Signed: _____



Signed: _____

Communication preferences

Club Lick will never reveal your personal details to anyone without your permission. But if you would like to be informed of future events at **Club Lick** then could you please tick one of the below

Please email me / us



Please post information (plain envelope)



Please Text me / us

