

## THE HOPLITE ASSOCIATION

Membership Secretary: Ashley Holt, Pen-Rhiw Farm, 35 Bryncethin Road, Garnant, Ammanford, Camarthenshire, SA18 1YP

## Membership Application Form

| Full Name of Main Applicant  | DOB   |
|--|---|
| Full Name of Partner (if applicable)   | DOB   |
| Names of Child(ren) and Age(s)   |   |
| Full Postal Address  |   |
| Phone Number   |   |
| E Mail Address   |   |
| Any Previous Re-enactment Experience?  |   |
| Any Medical Conditions (confidential)  |   |
| Role Preferred egg Hoplite, Civilian, Scythian   |   |
| Emergency Contact Number   |   |
| Yearly membership is £20 per individual or £35 for a family against conversion to full membership. Prior confirmation event. Please email <a href="membership@hoplites.org">membership@hoplites.org</a> to enquire. Association" | is required if you are seeking to attend a sample |
| I / we have read and understand the constitution a Association and agree with all terms and condition consent)   |   |
| Signed   | Date  |
| Signed   | Date  |

All information submitted on this form is kept in the strictest confidence and shall not be given to any other people/organisation., except with prior permission from the above named, or in case of emergency.