



EXETER FLOTILLA - APPLICATION FOR FULL MEMBERSHIP

Rank: .....

Initials: .....

Fore Names: .....

Preferred Name: .....

Surname: .....

Decorations: .....

Service: RN / RNR / RM / RMR / MN/ SCC/ Other

Address .....

.....Postcode: .....

Telephone: Landline .....

Mobile .....

Email address: .....

Date of Birth: .....

Car Details

Registration number..... Make and Model.....

Colour.....

Golfer? Yes/No Handicap .....

Brief service history:

Post service history:

Name of introducing member (if applicable): .....

Signature of applicant: ..... Date: .....

By completing this application you are agreeing to the Flotilla's Data Protection Policy

Please email completed form to: [membership@exeterflotilla.org.uk](mailto:membership@exeterflotilla.org.uk)