

Registration Form for BCGBA Membership



Applications for a Replacement Card only Please give reason for requesting a replacement card (eg card lost, card damaged, change of name): Address Post Code Email Tel: Landline Tel: Mobile Self Disclosure: Is there any reason that approving your membership could negatively impact on the club? Yes / No Have you ever had any Club membership refused or withdrawn in the past? Yes / No Sethnic Origin * Disability or Serious Illness #	"VG ASSOC"	registrar@bcgba.org.uk				Ret: NRMAF1.1	- January 2025	
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