



# shiretrust

the east stirlingshire supporters society

## Membership Application

Full Name		
Address		Postcode
Telephone	Home	Mobile
E mail *		D.O.B.

### Membership Category

*(Please tick appropriate Category(s))*

Adult	£10	<input type="checkbox"/>	OAP	£5	<input type="checkbox"/>
Student	£5	<input type="checkbox"/>	Junior	£5	<input type="checkbox"/>
Unemployed	£5	<input type="checkbox"/>	SHIRETRUST Share	£1	<input type="checkbox"/>

Please add a one off payment of £1 if aged 16 or over for a compulsory Trust share which entitles you to a vote. Members under age 16 cannot vote but are welcome to otherwise participate and have their say on trust issues.

#### Number of shares held in East Stirlingshire Football and Athletic Club Limited

A Shares.....

B Shares.....

**I agree to be bound by the rules of East Stirlingshire Supporters Society Ltd.**

**A copy of the rules is available from any office bearer upon payment of £2.00**

Signed.....

Date.....

Please return this form together with a cheque or postal order payable to - **SHIRETRUST**  
**PO Box 21654**  
**Falkirk**  
**Stirlingshire**  
**FK2 7XN**

For SHIRETRUST Use Only

Membership No		Category		Date	
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