

Please complete all sections of the form in BLOCK CAPITALS and send it, along with your membership fee to:
The Membership Secretary, Shrimpers Trust, PO Box 5830, Southend on Sea, SS1 9FD.

All Trust Members **MUST** complete a membership form.

YOUR DETAILS

Surname: First Name:
 Address:
 Post Code: Tel. Number: Occupation:
 Mobile Tel. No: Please tick box if you **do not** wish to receive Trust updates by SMS Message. ☐
 Email Address:
 Shareholder Information: Please tick if you hold shares in Southend United Football Club ☐
 Please tick if you are willing to be contacted regarding the issue of proxy voting rights ☐

MEMBERSHIP TYPE

Please tick the appropriate box to confirm your membership type.

1 Year Adult - £7.00 ☐ 1 Year OAP/Student*/Disabled - £5.00 ☐
 2 Year Adult - £10.00 ☐ 2 Year OAP/Student*/Disabled - £8.00 ☐
 3 Year Adult - £15.00 ☐
 *Please note that Students will be required to show their Student ID Card as proof of status. Date of Birth: / /
 Life Membership - £100.00 ☐ Life Membership – 67 or over- £50.00 ☐

Please note that all Memberships require an email address.

DONATION

I wish to donate to the Shrimpers Trust the sum of £_____ over and above my membership fee.

PAYMENT DETAILS

Please make cheques/postal orders payable to: **The SHRIMPERS TRUST** Total payment enclosed: £

WHERE DID YOU HEAR ABOUT THE SHRIMPERS TRUST

Shrimpers Bar ☐ Trust Website ☐ Club Shop/ Ticket Office ☐ SZ or Other Message Boards ☐ Other (please state)

DECLARATION

I wish to become a member of the Shrimpers Trust.

Signed: Date: / /

OFFICE USE ONLY

Date Application Received: Membership No: Share No: Expiry Date: