

MEMBERSHIP



To apply for membership please complete all questions.

Applicants / Account Holder's Name :

Number

Date :

Membership Type A :

Regular

Exclusive

VIP

Membership Type B :

Bronze

Silver

Gold

Full Name :

E-Mail :

Address :

Best Time To Call :

Morning

Afternoon

Evenings

Weekend

Mobile Number:

Gender :

Male

Female

Date Of Birth :

Emergency Contact :

First Name :

Last Name :

Postcode

Phone Numbers

Questions :

1. Have you read rules and agree to follow them? Yes No
2. Can we contact you about giveaways, promotions and exclusive events? Yes No
3. Will you try to remember to tag us in your social media posts ? we love to see our guests having a good time. Yes No