



MEMBERSHIP APPLICATION FORM

Name Date of birth

Address

..... Postcode

Telephone Mobile phone

e-mail

The above details will be included in a list that is made available to all members of the Association. So if you'd prefer any of your details not to be made public, then please write *NOT PUBLIC* next to them. For example, some members don't want their home address to be made known to all and sundry, and so we omit it from the published list.

Delete as inapplicable: Professional Magician / Semi-professional Magician / Amateur Magician

Occupation (if not Professional Magician)

What branches of magic interest you? (e.g. Close-up, Children's, etc)

.....

Please list any other conjuring-related skills that you possess (e.g. Juggling, Ventriloquism, etc)

.....

DECLARATION – I wish to become a member of the Watford Association of Magicians and I agree to abide by the Rules of the Association if admitted to membership.



Signed..... Proposed by.....