



Membership Form

* Mean it has to be filled. If not the form becomes invalid

Title* _____ Name* _____ Surname* _____

Date Of Birth* _____

Home Address* _____

Postal Code* _____

Prefix* _____ Mobile Number* _____

Email Address* _____

Profession _____

Choose Membership*

BABY SPARTAN

BLACK & RED PASSIONATE

JUNIOR SPARTAN

BLACK & RED FAITHFUL

TEEN SPARTAN

BLACK & RED LOYAL

Hamrun Spartans FC, may from time to time, be asked for personal information about the members of the club. The data collected and processed, will be done so in accordance with current Data Protection Legislation. Hamrun Spartans FC will use your personal information (a) to provide products & services as part of your Hamrun Spartans FC membership & (b) to contact you by post, phone or electronically (incl. email, & SMS) about Hamrun Spartans FC related products, services, offers & events. Please confirm your consent to Hamrun Spartans FC by indicating your preference and signing this form in the space provided below. If no communication is received from you, Hamrun Spartans FC will be of the understanding that you are automatically giving your consent to the above.

I **consent** to my **data** being collected and processed by **Hamrun Spartans FC**

I **DO NOT consent** my **data** being collected and processed by **Hamrun Spartans FC**

Paid By* _____ Collected by* _____ Date* _____