



European Shuai Jiao Union

Membership Application

Please complete this form in **black** ink and BLOCK capitals or typed script and include two recent colour passport size photographs or a JPEG image of the Organisation's Leader

1. Organisation Details	
Name	
Date Established	
Government Registration	
ESJU No.	Renewal Only
2. Organisation Leader (eg President, Chairperson, CEO or Director)	
Title	
First Name	
Surname	
Position	
Date of Birth	
Gender	
Education (eg PhD)	
3. Organisation Address	
Building, No. and Road	
Area/Town	
City/County	
Country	
Post Code	

4. Organisation Contact			
Telephone			
Facsimile			
E-mail			
Website			
5. Organisation Executive Staff (Title, First Name and Surname)			
Vice President			
Secretary General			
Treasurer			
Chief Referee			
Chief Coach			
6. Organisation Personnel			
Number of Instructors			
Number of Officials			
Number of Students			
Number of Referees			
7. Organisation Structure (Please Tick)			
Style	Profit <input type="checkbox"/>	Non Profit <input type="checkbox"/>	Academic <input type="checkbox"/>
Venue	Permanent <input type="checkbox"/>	Public Hire <input type="checkbox"/>	Private Hire <input type="checkbox"/>
Audience Seating	None <input type="checkbox"/>	Up to 200 <input type="checkbox"/>	Over 200 <input type="checkbox"/>

On behalf of my organisation and its members, I subscribe to the aims and objectives of the European Shuai Jiao Union and agree to abide by its constitution, rules, regulations and governance upon becoming a member.

Signature of Organisation's Leader

Date

For Office Use Only	Probation Approved <input type="checkbox"/>	Ordinary Member <input type="checkbox"/>
Fee Paid <input type="checkbox"/>	Membership Approved <input type="checkbox"/>	Associate Member <input type="checkbox"/>