|  |  |  |
| --- | --- | --- |
|  | **President:** Ken Clark**Chairman:** Mike Baker**V. Chair:** Tony Smith | **Secretary:** Geoff Baldock**Treasurer:** Malcolm Hillen**Membership:** Aaron Baker |

**RA Membership 2016/17**

**Personal Details**  *Items marked \* are mandatory, as required by the Referees’ Association*

|  |  |  |  |
| --- | --- | --- | --- |
| Name:\* |  | Date of Birth:\* | DD/MM/YYYY |
| Address:\* |  |
| Postcode:\* |  |
| E-mail:\* |  |
| Phone (Mobile):\* |  | Phone (Home):\* |  |
| Referee Level:\* |  | County FA:\* |  |
| Year first qualified:\* |  | FAN Number:\* |  |

**2016-17 Activity**  *Please check (x) as required*

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | R | AR |  | R | AR |  | R | AR |
| Hellenic League: |  |  | SR Women’s FL |  |  | FA Tutor – (*cite level)* |  |
| Thames Valley Premier: |  |  | Berks County Girls League |  |  | FA Assessor – *(cite level)* |  |
| Reading District Sunday: |  |  | Reading & West Berks Yth: |  |  | FA Mentor |  |
| *Other – please enter* |  |  | *Other – please enter* |  |  | *Other – please enter* |  |  |
| If you are no longer an active Referee, please check here |  |  |  |  |  |

If you would like to mentor on behalf of Reading RA, please indicate availability by deleting as appropriate:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Saturday: | AM / PM | Sunday: | AM / PM |  | Check (x) here to request a mentor: |  |

**Membership Fees for 2015/16 – Includes Personal Accident Insurance**

|  |  |  |  |
| --- | --- | --- | --- |
| *(Check (x) as required)* | Fee Due |  | Fee Paid |
|  | Life Member or Vice President | Optional |  |  |
|  | Full Member | £26.00 |  |  |
|  | Concession | *Over 60 as at 1.4.16,**or in full-time education (valid student card required)* | £15.00 |  |  |
|  | Associate Member | *Enter the RA society with which you have Full RA membership* | £15.00 |  |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Total Payment**: | £ |  Cash |  | / Cheque |  | / BACS |  |

|  |  |
| --- | --- |
| Signed: | Date: |

**Please send this form completed to** **membership@readingrefs.org.uk****, or print and return at a meeting of the Reading Referees’ Association with payment by cash or cheque. Thank you**

|  |  |
| --- | --- |
| **BACS Payment Details:**Name: Reading RAAccount No: 11587064 / Sort Code: 40-38-04Reference: (Your Name)/1617 | **Cheques** should be made payable to “Reading Referees’ Association”. |