

Request to hold copy of Companion Card

PERSONAL DETAILS

First name:	Surname:
Mobile:	Email:

EMERGENCY CONTACT/PARENT/GUARDIAN DETAILS

First name:	Surname:
Mobile:	Email:

TERMS AND CONDITIONS

I authorise Cockburn ARC to keep a copy of my companion card on record and understand:

- I must see reception staff upon each visit so the companion card on record can be sighted.
- It is my responsibility to ensure the companion card on record is kept up to date.
- If my membership has been cancelled, the copy of my companion card will no longer be held on record.

Member or Parent/Guardian Signature:	Date:
Staff Acceptance:	Date:
Notes and expiry date added to tracking:	Date:

Place companion card here and take copy of form.