

WELSH STRENGTH ASSOCIATION

Membership Application Form

Annual membership fee: £10.00

Please note that membership runs from the start of January to the end of December irrespective of when you join.

Name:

Date of Birth:

Address:

Postcode:

Telephone Number(s):

Coaching Qualifications:

Referee's Qualifications:

Please make all cheques payable to **W.S.A.** and return the form and payment to:

**Ken Williams
723 Clydach Road
Ynystawe
Swansea
SA6 5BA**

Please indicate below which section you will be competing in:

A: Agree to drug testing ()

(You must be a member of the WPU, BWLA or the BDFPA if selecting this option)

B: Do not agree to drug testing ()

The WSA will not be held responsible for any accidents or injuries that may occur.

Signature:

Date: