

# ACTIVEZONE

## FITNESS CLUB

www.activezonemalta.com - ☎ 21228891

Please fill in clearly in **BLOCK LETTERS**

### PERSONAL DETAILS

Name: \_\_\_\_\_

Surname: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Occupation: \_\_\_\_\_

Post Code: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

I.D. No: \_\_\_\_\_

Home Tel: \_\_\_\_\_

Work Tel: \_\_\_\_\_

Mobile No: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Any Medical Condition: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

#### For Official Use Only:

Students only

First year

Second year

Type of Membership:      12   6   3   1

Membership No: \_\_\_\_\_

Other \_\_\_\_\_

Commenced on: \_\_\_\_\_

Valid up to: \_\_\_\_\_

Staff Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Comments/Payments:      CARD   CASH   CHEQUE   SMART CARD