



APPLICATION FOR FULL MEMBERSHIP TO THE OSA

FULL NAME

ADDRESS

.....

.....POST CODE.....

MOBILE TELEPHONE NUMBER

E-MAIL ADDRESS

DATE OF BIRTH.....

I HAVE BEEN A STUDENT AT SCARBOROUGH COLLEGE FROM.....-

SCHOOL HOUSE.....(IE Crews, Armstrong, Hornby, Cooper)

DETAILS OF ANY OFFICES HELD WHILE AT SCARBOROUGH COLLEGE INCLUDING CAPTAIN OF SPORT, SENIOR PREFECT, HEAD OF HOUSE, REPRESENTATIVE SPORTS HONOURS, SPECIFIC INTERESTS INCLUDING MUSIC AND DRAMA;INSTRUMENTS PLAYED AND MUSICALS PERFORMED IN.

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I WISH TO APPLY FOR FULL MEMBERSHIP TO THE OSA AND CONFIRM THAT I HAVE BEEN A PUPIL AT SCARBOROUGH COLLEGE FOR A MINIMUM OF 2 YEARS. BY SIGNING BELOW I AGREE TO THE TERMS OF BEING A MEMBER AND HAVING MY EMAIL ADDRESS HELD ON RECORD SOLELY FOR THE USE OF OSA PURPOSES.

I ENCLOSE A CHEQUE FOR £50.00 PAYABLE TO THE OLD SCARDEBURGIANS' ASSOCIATION (OSA)

I ENCLOSE £50.00 CASH

SIGNED.....DATE.....

PLEASE RETURN TO : THE SECRETARY, OSA, C/O SCARBOROUGH COLLEGE, FILEY ROAD, SCARBOROUGH, YO11 3BA

THE OSA RULES CAN BE FOUND ON THE OSA WEBSITE OR BY REQUESTING A COPY FROM THE SECRETARY.

(MAY 2017 – MEMBERSHIP UPGRADE AFTER LEAVING THE COLLEGE)