



Cairns Potters Club

KEY REGISTRATION

Date ____ / ____ / ____

Membership number _____

Name: _____

Phone _____

I agree, when using the club facilities and equipment to follow the procedures as set out in the accompanying information sheet.

* An information sheet outlining Club rules will be given to all key recipients.

Signed _____

----- OFFICER USE ONLY -----

Please confirm the payment before issuing a key

Key issued by _____ Date Issued ____ / ____ / ____

Return Key New Issue

Payment [Cash / Cheque / Bank Transfer (confirm receipt)]