



Doonhamers Travel Club Membership Form 2019/20



Adult
£15

Junior
£5

Parent & Child
£16 (+ £1 for each additional child)

Please tick membership required

Name _____ D.O.B. _____
(16 yrs or younger)

Address _____

Contact Telephone Number _____

E-mail Address _____

Additional Names for Parent/Child Membership

Name _____ D.O.B. _____

Name _____ D.O.B. _____

Name _____ D.O.B. _____

Signature _____ Date _____

**To be completed by Parent/Guardian of above named Junior Member
between the ages of 14-16 years.
Under 16's must have form returned in person by parent/legal guardian
before being allowed travel**

I give permission for _____ to travel unaccompanied and understand that the
Doonhamers Travel Club will **not** be held responsible for them.

Name (please print) _____

Contact Number _____

Signature _____ Date _____

Please tick if you agree to have the above details passed to Queen of the South F.C. Limited, to use for promotional material and a supporters database.