



Doonhamers Travel Club Membership Form 2026/27



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 _____
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**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.