

FAMAGUSTA SKI CLUB

ΧΙΟΝΟΔΡΟΜΙΚΟΣ ΟΜΙΛΟΣ ΑΜΜΟΧΩΣΤΟΥ

Web: www.fsc.com.cy
Email: info@fsc.com.cy

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RENEWAL
MEMBERSHIP FORM
2023

Adult 1				FEE : €20	
Name:		Surname:			
Date of Birth:	ID No.:		T	elephone:	
Email :	1				
Address:					
Adult 2		FEE : €20			
Name:	1	Surname:			
Date of Birth:	ID No.:		T	elephone:	
Email:					
Address:					
1 st Child				FEE : €15	
Name:		Surname:			
Date of Birth:		ID No.:			
and at the				FFF 640	
2 nd Child		FEE : €10			
Name: Date of Birth:		Surname: ID No.:			
Date of Birtif.		15 140			
3 rd Child		FEE: €10			
Name:		Surname:			
Date of Birth:		ID No.:			
 Please include photos for ski passes by email I confirm that the above information is correct and agree for it to be registered by Famagusta Ski Club officials. I agree to follow the rules and guidance of Famagusta Ski Club officials and trainers YOUR SIGNATURE					
NAME					
NAME					
DATE					
For Club Use:					
FSC Reg form	CSF Academy For	CSF Academy Form		Ski Insurance form	
FSC Membership Fee	CSF Academy Fee	CSF Academy Fee		KOA Health card	
FSC Season Pass	CSF Federation Fo	CSF Federation Form			