

Boujjs Application Form

To join Boujjs please fill in the application form signed by a proposer and seconder and return within 28 days, in the envelope provided.

When Boujjs receives your payment, written confirmation of your admittance as a member will be sent to you.

Name	Title	First Names	Surname
Address			
City		Telephone	
Zip/Post Code		Mobile	
Email			
Date of Birth		Occupation	

Proposal

(to be signed by 2 existing members)

	Name	Boujjs No.	Signature	Date
Proposed				
Seconded				

Boujjs Use

Approved				
SO STB				
P Received				
Card Sent				

boujjs

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