



NEW MEMBER INFORMATION

PERSONAL DATA

ID NO.: _____

NAME: _____ SURNAME: _____

DATE OF BIRTH: ____ / ____ / ____

MARITAL STATUS

MARRIED DIVORCED SINGLE

CORRESPONDENCE

ADDRESS: _____ STREET NO: _____

AREA: _____ POSTAL CODE: _____

TELEPHONE NUMBERS

RESIDENCE: _____ MOBILE: _____ FAX: _____

E-MAIL: _____ @ _____ WORK: _____

PROFESSION: _____

HOW DID YOU LEARN FOR OUR GYM?

- | | |
|------------------------------------|--|
| <input type="checkbox"/> Leaflet | <input type="checkbox"/> Television |
| <input type="checkbox"/> Magazine | <input type="checkbox"/> Radio |
| <input type="checkbox"/> Newspaper | <input type="checkbox"/> Referral..... |
| <input type="checkbox"/> Poster | <input type="checkbox"/> Other: |

I ACCEPT RECEIVING INFORMATIVE SMS MESSAGES NAI OXI

SUBSCRIPTIONS

- | | |
|--|---------------------------------------|
| <input type="checkbox"/> MONTHLY | <input type="checkbox"/> ST. Monthly |
| <input type="checkbox"/> 6 PACK | <input type="checkbox"/> ST. 3 Months |
| <input type="checkbox"/> X-PRESS FIT (12 MONTHS) | |
| <input type="checkbox"/> SUPREME (18 MONTHS) | |

ACCESS CARD

CARD NO.: _____ PIN: _____

MEMBER ACCESS CARD COSTS €7 AND ITS USE IS OBLIGATORY BY ALL MEMBERS. IN CASE OF LOSS YOU ARE REQUIRED TO DECLARE SO AT THE RECEPTION. REISSUE OF ACCESS CARD COSTS €7.

SIGNATURE

DATE
