



# MEMBERSHIP APPLICATION FORM

Personal membership  Company membership

Please complete the following in block capitals

TITLE (Mr/Mrs etc.): \_\_\_\_\_

COMPANY NAME: \_\_\_\_\_

FIRST NAMES: \_\_\_\_\_

SURNAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_ POSTCODE: \_\_\_\_\_

TELEPHONE No.: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_

## Payment of Membership Fee

Complete the form and return either by post, fax or at any of the restaurants, where payment will be processed. Your membership pack will then be sent out by post within three working days.

Cash  Cheque  Credit/Debit card

CREDIT CARD No.

3 DIGIT SECURITY No.

EXPIRY DATE:  SWITCH ISSUE No.

Customer's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Manager's Signature: \_\_\_\_\_

Restaurant: \_\_\_\_\_

Office use:

Issue date: \_\_\_\_\_ Expiry date: \_\_\_\_\_

Please complete and fax this form to us on: **020 7494 1456**

or return by post to:

**BENIHANA RESTAURANTS UK LTD**  
**FREEPOST NAT4695, 37 SACKVILLE STREET, LONDON, W1E 3ZY**