



COYA

ONE ONE EIGHT PICCADILLY

APPLICATION FOR MEMBERSHIP



COYA

By applying for a membership at Coya Members' Club you are agreeing to be bound by the rules of the club. A full copy of club rules and by-laws will be sent together with the membership welcome pack once application is approved.

All sections of the application form must be completed for it to be considered by the Membership Committee, including a recent photograph.

All of the information provided will be treated in the strictest of confidence and used for internal club purposes only.

### CANDIDATE DETAILS

SURNAME \_\_\_\_\_ TITLE \_\_\_\_\_

FORENAME(S) \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_

\_\_\_\_\_ POSTCODE \_\_\_\_\_

E-MAIL \_\_\_\_\_ MOBILE \_\_\_\_\_

BUSINESS ADDRESS \_\_\_\_\_

\_\_\_\_\_ POSTCODE \_\_\_\_\_

BUSINESS E-MAIL \_\_\_\_\_ BUSINESS TELEPHONE \_\_\_\_\_

ADDRESS TO WHICH CORRESPONDENCE SHOULD BE SENT

HOME

BUSINESS

OTHER - PLEASE PROVIDE DETAILS \_\_\_\_\_

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COYA

The Membership Committee appreciates as much information as possible to assist them in making a decision.

Please affix a passport style photo or e-mail a suitable picture to: membership@coyares taurant.com

NATIONALITY \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

NAME OF SPOUSE/ PARTNER \_\_\_\_\_

NAME OF CHILDREN \_\_\_\_\_

OTHER CLUBS OF WHICH YOU ARE A MEMBER \_\_\_\_\_

WHAT DO YOU EXPECT FROM THE MEMBERS' CLUB:

CULINARY EXPERIENCE  FUN  WORKING SPACE  NETWORKING  MUSIC

SOCIALIZING  DANCE  MASTER CLASSES  HOME AWAY FROM HOME

OTHER(S) \_\_\_\_\_

CHARITIES YOU SUPPORT \_\_\_\_\_

WHAT ARE YOUR INTERESTS IN ART:

VISUAL ARTS  MUSIC  FILM  DECORATIVE ARTS

FASHION  THEATRE  PERFORMING ARTS  DESIGN

OTHER(S) \_\_\_\_\_

PLEASE PROVIDE INFORMATION RELATING TO YOUR CAREER AND OTHER INTERESTS. Please feel free to include additional pages where necessary.

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COYA

## PROPOSER AND SECONDER

Please note that both your proposer and seconder must be existing members of Coya Members' Club, and must provide a letter of recommendation which is to be included with this application or sent separately to [membership@coyarestaurant.com](mailto:membership@coyarestaurant.com)

NAME OF PROPOSER (Existing member) \_\_\_\_\_

NAME OF SECONDER (Management team) \_\_\_\_\_

## DECLARATION

I hereby apply for membership to Coya Members' Club. I have read and accepted the club rules and conditions of membership made available at [www.coyarestaurant.com](http://www.coyarestaurant.com)

SIGNATURE OF CANDIDATE \_\_\_\_\_

DATE \_\_\_\_\_

Please send the completed application form to:

Coya Members' Club  
118 Piccadilly  
Mayfair, London  
W1J 7NW

E-mail: [membership@coyarestaurant.com](mailto:membership@coyarestaurant.com)  
telephone: +44 (0) 207 0427 118- option 3

Company Registration Name: Coya (Restaurant) Ltd  
Company Registration Number: 7824813  
Company Registration Address: Prince Consort House, Albert Embankment, London, SE1 7JT  
V.A.T. Registration Number: GB 137 8136 03



COYA

**CREDIT CARD AUTHORIZATION FORM 2015-2016**  
**MEMBERSHIP ANNUAL FEE £1200, 00**

TITLE \_\_\_\_\_

FIRST NAME \_\_\_\_\_

SURNAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

POSTCODE \_\_\_\_\_

TELEPHONE \_\_\_\_\_

FAX \_\_\_\_\_

E-MAIL \_\_\_\_\_

Please complete details below to  
authorize payment:

TYPE OF CREDIT CARD:

AMERICAN EXPRESS

MASTERCARD

VISA

OTHER

NAME ON CARD \_\_\_\_\_

CARD NUMBER \_\_\_\_\_

START DATE \_\_\_\_\_

EXPIRY DATE \_\_\_\_\_

SECURITY CODE \_\_\_\_\_

I AUTHORIZE YOU TO CHARGE  
MY CREDIT CARD FOR:

ANNUAL FEE £ \_\_\_\_\_

Please send the completed application  
form to:

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W1J 7NW

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Telephone: +44 (0) 207 0427 118

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

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