

**THE ASSOCIATED CONJURERS OF EAST SUSSEX (“THE ACES”)  
MEMBERSHIP FORM**

Name Mr/ Mrs / Miss / Ms / other

\_\_\_\_\_

Stage name (if appropriate)

\_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Post Code \_\_\_\_\_

Telephone Contact Number: \_\_\_\_\_

Email Address \_\_\_\_\_

Type of magic performed:  
*(Please tick all that apply)*

Close-up      Children's      Cabaret      Mentalism      Escapology

Allied art (ie. juggling/Punch & Judy etc)

Member of IBM / The Magic Circle / other magic club \_\_\_\_\_

How did you hear about The Associated Conjurers of East Sussex?

Facebook

Local awareness

Friend of a member

**When you have completed this form, please return it to:**

Nicky Lewes  
Secretary  
ACES Magic Club  
Thomas A'Beckett Church Hall  
Cliffe High Street,  
Lewes,  
East Sussex,  
BN7 2AW