

BEACON WHEELERS

BEACON WHEELERS MEMBERSHIP FORM - 2018

I wish to apply for / renew my membership of Beacon Wheelers
I agree to abide by the rules of the club. I understand the nature of the club's activities, and that in the case of an accident no claim may be made against any club official or event organiser in respect of the accident or any other circumstances relating to that accident.

Cheque payable to

Beacon Wheelers

Send to Club Secretary

Mrs Lorraine Egglestone - beaconwheelers@yahoo.co.uk

5 Cypress Way, Carleton Heights, Penrith, CA11 8UN

Personal Details - please notify the Membership Secretary (above) of any subsequent changes

Full Name			
Address			
Post Code		Telephone No	
E-mail Address			
Signature		Date	
I enclose my Annual Membership Subscription of:			
Adult (First / Second Claim)	£10-00		Second Claim Club (If applicable)
Junior (16 – 18 years old)	£10-00		
Youth (Under 16)	£5-00		Date of Birth of U18's
Total Subscription	£		
Signed			

Medical Conditions

Please make a note of any medical conditions you feel we need to know about below. If you have any concerns about your child participating in any form of physical activity then please consult your GP before giving permission for your child to take part in any activities.

Data Protection

You agree that the information we hold about you can be held on computer and on paper file. You agree that any information that you give us may be used for purposes relating to BW club events, BW time trials, open CTT time trials and BC road/track races.

If you do not wish this information to be used please tick this box.

Please note that Beacon Wheelers may take photographs/video footage at events. These could be used in coaching resources, placed on the BC or BW website, or for general publicity purposes. If you object to photographs/video footage of your child being used in this way, please tick this box.

The name of your child will not be published without first seeking permission.

Parental Consent (must be completed for all members 16 or under)

I hereby consent to my child taking part in the coaching sessions organized by Beacon Wheelers and understand and agree that my son/daughter participates entirely at his/her own risk.

Signed (Parent/Guardian): Date: _____

Emergency Contact Details

Name _____ Relationship to Participant _____

Contact Number(s) _____ Or _____