



Application for Membership

(Year ending 31st March 2018)

Please complete the below in **BLOCK CAPITALS**

Name:	Address: Postcode:
Surname:	
Date of Birth:	
Telephone Number:	
Gender:	
Nationality:	
Email Address:	
Do you consider yourself to have a disability? (Please circle) YES NO If yes what is the nature of your disability?	
Are you a member of another club? (Please circle) NO Yes , would you.... Like to join as a first claim? Like to join as a second claim?	
Emergency Contact Name	Emergency Contact Number

Please read the below before signing

I declare that I am an amateur and agree to be bound by the rules of UK Athletics and also the rules of Okehampton Running Club as contained within the Club Constitution.

1. I confirm that I have read and agree to the club code of conduct
2. I understand that I am running at my own risk and by completing and signing the Par Q form I have informed the club of any medical conditions that I have at the present time, that might affect or be affected by my running with the club.
3. Acceptance for membership in no way makes Okehampton Running Club liable for any illness, accident, injury or loss howsoever caused.
4. I accept that my details will be held on a computer database and that this information will only be passed to certain club officials on a need to know basis. All personal information will remain confidential.

I enclose a cheque/cash for the sum of £33

As of 01/01/2018 – Sum of £22.00

(Cheques made payable to Okehampton Running Club)

Signed.....

Date.....