

Junior Membership Form – Season 2018

This form, Health Questionnaire and payment to be given to Charlotte Roberts

For admin use only

Membership expires: 31 March 2018 if joining for winter after 01 October 2017 and 31 March 2019 if renewing for season 2018.

	Instalment 1 or Full amount	Instalment 2	Instalment 3
<i>Date</i>			
<i>Amount</i>			
<i>Method</i>			

Personal details

Child's Full Name		Age	
Address (including postcode)		Date of birth	
			We communicate to members via email and text message, therefore the information below is important but will not be passed onto external parties. If you do not wish these details to be shared within the club please tick here : <input type="checkbox"/>
Parent or Guardian's name			
Parent or Guardian's email address			
Parent or Guardian's mobile number			
Parent or Guardian's landline			

Medical information

All information given will be treated in strictest confidence and only passed onto coaches and coordinators as deemed necessary. Please detail below any important medical information that our coaches should be aware of (e.g. epilepsy, asthma, diabetes, muscular or skeletal injury). Please also detail any medication you are taking.

Disability

The Disability Discrimination Act 1995 defines a disabled person as anyone with 'a physical or mental impairment, which has a substantial long-term adverse effect on his or her ability to carry out normal day-to-day activities'.

Do you consider your child to have a disability? Yes No

If yes, what is the nature of the disability?

--

Consents and important information

Please tick all applicable boxes

	My child is a competent swimmer
	I have read and understood the Health and Safety guidelines and agree to the conditions therein. Health and Safety Officer is Steve Dunk
	My child and myself/ourselves agree to adhere to the club's code of conduct
	I agree to the club using pictures and such content of my child for marketing and training purposes. All pictures will be of a decent nature and used purely in a good manner
	My child is currently a member of another club affiliated to the CPGA and am happy to be transferred to Mount's Bay's rowing register

Membership types – per annum – please tick

MBPGC account number 90752770 sort code 20-67-19 clearly state your initials or name and 'subs'

Half price fees for new members winter training from 01 October 2017 to 31 March 2018

Payment method (please tick)	Cash		Cheque		Bank transfer	
------------------------------	------	--	--------	--	---------------	--

	£ 35.00	Junior single - renewal
	£ 17.50	Junior single – new member, winter only
	£160.00	Family (must include at least one junior rower)
	£ 80.00	Family – new members, winter only
	£405.00	Life

giftaid it

Gift aid is a Government initiative which enables us to reclaim some of the tax on the money you have fundraised or donated as long as you are a UK tax payer. It will not cost you anything.

Please tick if applicable

	I confirm I am a UK tax payer and consent to all money I donate or fundraise to be Gift Aid donations.
--	--

******Please now complete the attached Health Questionnaire******

Signed by parent or guardian:.....

Dated:.....