

## **New Member Application Form**

Annual subscription: £20 individual (£15 if Standing Order); £25 family; £10 under 18; £10 second claim member. Racing fees £3 per race or £25 for full season.

•	ı, (name)
	of (address)
	wish to become a member of Ross-on-Wye and District Cycling Club.
•	Date of birth (if under 18 years of age see below for Parental Consent):
•	Telephone Number/s:
•	Email Address:
•	I am happy for my telephone number/s to be issued to and used by other members of Ross-on-Wye and District Cycling Club. $\underline{Y}$ / $\underline{N}$
•	I am happy for my email address to be issued to and used by other members of Ross-on-Wye and District Cycling Club as the main form of communication of important matters. $\underline{Y} / \underline{N}$ (If no, we wi discuss your preferred method of communication with you.)
•	If you have any medical conditions which could be an issue whilst on a ride or in case of an accident, it is important that those you are riding with are aware, for their safety as well as your own. Please mention here any such conditions and ensure that anyone you are riding with is aware.
•	Are you happy for the above information regarding medical conditions to be notified to officials and marshals at club events: $\underline{Y} / \underline{N}$ (this is not a guarantee that they will be notified so please notify them yourself if appropriate)
•	Are you a first claim member of another club? Y / N If so, which club?
•	Have you been a member of a cycling club before? Y / N If so, which club?
Si	gnature of applicant for membership:
	ase return this form along with your subscription payment to the Club Secretary, Bob Hill at: I Tan House, St Owens Cross, Hereford, HR2 8LG
Pa	rent/guardian consent (required if applicant is under 18 years of age):
l, .	(name), agree to(name) who is my
	(relationship), continuing to be a member of Ross-on-Wye and District cling Club and participating in club activities.