

## **Club Membership Form**

Please complete this form and return to:

**VC** Walcot Secretary

20 Mayfield Road

Bath BA2 3QA

Please enclose a cheque for £10 made payable to "Velo Club Walcot" or transfer funds to; NatWest Bank, Sort Code 60 02 05 - Acct. 59155671

Membership valid until 1st April 2013.	
Title Mr/Mrs/other (Delete as appropriate) Surname	
Full Name(s)	
Address	
Telephone Number	
E-mail	
Please tick if you do not wish to receive info	rmation via e-mail 🗌
Do you have any medical conditions or injur	ries that may affect your cycling?
Yes/No (Delete as appropriate)	
If yes, please specify	
Emergency Contact Details:	
Name	
Address	
Relationship to you	
Telephone Number	
I understand that taking part in cycling act behave in a safe and responsible mann members and myself. All club activities are that no member or officer of Velo Club Wale	ner to reduce these risks for other clube e undertaken at my own risk and I agree
If under 18 this form must be signed by a Parent/guardian.	
Signed	Date
Parent/Guardian	Date

Data collection notice: All data collected within this form by Velo Club Walcot is purely for establishing or maintaining membership, supporting the club to provide or administer activities for either its members or those who have regular contact with it. At no point will data be passed to a 3<sup>rd</sup> party without prior consent.