



Membership Application Form

SECTION A: ATHLETE DETAILS	
<i>Title</i>	
<i>Full Name</i>	
<i>Address</i>	
<i>Telephone Numbers</i>	<i>(Home)</i> <i>(Mobile)</i>
<i>Email Address</i>	
<i>Date of Birth</i>	
<i>Membership Type - (Please Tick)</i> <i>(Competitive - Runner)</i> <i>(Social - Non Runner)</i>	<i>Competitive () £35 Per year. Includes UK Athletics membership. Free showers and club vest for new members</i> <i>Social () £20 Per Year</i>
<i>Please state club vest Size</i>	<i>Male () Female ()</i> <i>Small () Medium () Large ()</i>
<i>Are you a member of any other running club (if yes please state which club)</i>	

SECTION B: MEDICAL DETAILS	
<i>Please detail any important medical information that we should be aware of (e.g. Epilepsy, Asthma, Diabetes, Allergies ETC.) Please do not leave blank- If no relevant info then please state 'None'</i>	

SECTION C: EMERGENCY CONTACT DETAILS		
<i>Please give emergency contact information of two people who we may contact in the event of an incident/accident</i>	<i>Emergency Contact one name</i>	
	<i>Emergency Contact one number</i>	
	<i>Emergency Contact two name</i>	
	<i>Emergency Contact two number</i>	

SECTION D: ATHLETE CONSENT

It may be essential at some time for authorised persons, on behalf of the club, to have the necessary authority to obtain urgent treatment which may be required whilst at representative club competition or training. Please sign below to give consent to emergency treatment being given to the named athlete on this form by trained personnel.

<i>Print</i>	
<i>Signed</i>	
<i>Date</i>	

By completing this form, I am willing to abide by the club code of conduct for athletes. I agree to always behave in the manner befitting a Goole Viking Striders athlete, when attending training and club events.

<i>Print</i>	
<i>Signed</i>	
<i>Date</i>	

SECTION E: PAYMENT DETAILS

<i>Payment Enclosed: Cheques payable to "Goole Viking Striders"</i>	<i>Cheque () Cash() Amount: £</i>
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Please hand in your application form and payment or post (not cash) to:-

Mike Pollard, 15 Old Rugby Park, Goole, East Yorks, DN14 6BJ

By signing this form you agree that you are medically able to run. If in doubt please see your doctor before starting any exercising program



We look forward to welcoming you to the club.
or further information please check the website at www.vikingstriders.co.uk