

BOLSOVER & DISTRICT CYCLING CLUB

Application for Club Membership 2010

I wish to join Bolsover & District Cycling Club and agree to abide by the Rules and Regulations of the Club.

Membership runs from 1 January to 31 December. New applications for membership received after 30 September will run until 31 December the following year.

Full Name: _____

Address: _____

Post Code: _____ Date of Birth: _____

Tel No: _____ Mobile No: _____

E-mail address: _____

Senior (18 - 64 yrs inc.)	£10.00	<input type="checkbox"/>	Additional household member*	£5.00	<input type="checkbox"/>
Junior (16 - 17yrs inc.)	£5.00	<input type="checkbox"/>	Over 65	£5.00	<input type="checkbox"/>
Youth (12 -15yrs inc.)	£2.50	<input type="checkbox"/>	Unwaged	£5.00	<input type="checkbox"/>
U12 [†]	FREE	<input type="checkbox"/>	Associate	£5.00	<input type="checkbox"/>
Family (2 adults and children U16) [*]	£20.00	<input type="checkbox"/>	2 nd claim	50% of above	<input type="checkbox"/>

† FREE when a senior member (parent or guardian) living at same address joins at the same time

* FAMILY / HOUSEHOLD MEMBERSHIP: Please complete a separate form for each member

If you are under 18, please see over for parental consent

Interests (Tick all of interests)

- | | | |
|------------------------------------------|-----------------------------------------|-------------------------------------------|
| <input type="checkbox"/> Leisure cycling | <input type="checkbox"/> MTB XC | <input type="checkbox"/> Club runs |
| <input type="checkbox"/> Audax / Touring | <input type="checkbox"/> MTB 4X | <input type="checkbox"/> Family rides |
| <input type="checkbox"/> Road racing | <input type="checkbox"/> Time Trials | <input type="checkbox"/> Social events |
| <input type="checkbox"/> Track racing | <input type="checkbox"/> BMX racing | <input type="checkbox"/> Women only rides |
| <input type="checkbox"/> Cyclo-Cross | <input type="checkbox"/> Cycle Speedway | <input type="checkbox"/> Weekends away |

Other (please specify) _____

B&DCC will use the information you have provided here for the purpose of providing you with information about Club activities and benefits available to you as a member by post, email or SMS / text message as appropriate. B&DCC will not disclose this information to any other person or organisation except in connection with the above purposes.

I agree to the above use of my data.

Signature: _____ Date: _____

Bolsover & District Cycling Club is fully committed to Equal Opportunities and will ensure that there is open access to all those who want to participate in the sport and that they will be treated fairly.

I enclose the annual subscription of £.....

Please make cheques payable to: **Bolsover and District Cycling Club**

Please return completed form to:

Matt Connley, Secretary, Bolsover & District CC, 7 Eskdale Close, Bolsover, Chesterfield, S44 6RL

Insurance

The Club strongly recommends that you join, as an independent member, either British Cycling (BC) or the Cyclists' Touring Club (CTC).

Whilst the club itself is affiliated to these organisations, this does not cover individual members for third party (public) liability insurance or free legal advice and support.

Details of BC and CTC membership can be obtained from the Secretary or from the organisation's websites: www.britishcycling.org.uk or www.ctc.org.uk.

Are you interested in joining either of these organisations?

Yes

No

If yes, please indicate your preference

BC

CTC

If already a member, please quote your Membership No.: BC _____ CTC _____

Parental Consent

To be signed by the parent or guardian of Club Members under the age of 18

I (name): _____

of (address): _____

_____ Post Code: _____

being the Parent / Guardian of: _____

hereby agree to his / her membership of **Bolsover & District Cycling Club** and declare as follows that:

1. I understand and agree that my son / daughter will participate in activities promoted under the Club's rules and regulations entirely at his / her own risk. I have considered and understand the nature of such events and have discussed them with my son / daughter. I am satisfied that my son / daughter is sufficiently responsible and competent to assume full and entire responsibility for his / her own safety whilst engaged in any Club activity.
2. I understand that all members aged 12 or under **must** be accompanied by a responsible adult (e.g. parent or guardian) whilst engaged in any club activity.
3. I understand and have impressed upon my son / daughter that all participants in Club activities on the public highway must observe the law of the land relating to road travel. I am satisfied that he / she is sufficiently responsible and competent to ride in a manner which is safe to himself / herself and others.
4. I understand and agree that my son / daughter shall participate in any Club activity, on or off the Public Highway, without any liability whatsoever on the part of the Club, Club Officials or Club members in respect of any injury, loss or damage suffered by him / her, provided that this does not exclude the liability of any such party for death or personal injury arising from that party's negligence.
5. I understand that the Club, its members, agents and other participants may take photographs during the course of an event, mostly for private use but some may be used for publicity purposes. Should I not want photographs of my son / daughter used in any publications I will indicate this below.

Signature: _____ Date: _____

Photographic consent: I do not want any photographs of my child to be used in any publications (tick)

NB. Additional parental consent may be required to be completed and signed for road, circuit, track, BMX and MTB racing and Cyclo-Cross events organised under the rules and regulations of the British Cycling Federation should your son / daughter decide to participate in these events as a racing cyclist.