MALLARD FENCING CLUB

MEMBERSHIP FORM

SURNAME: FORENAMES:
ADDRESS:
POSTCODE: TEL NO:
GENDER: ETHNICITY:
IF UNDER 18 – DOB: EMAIL:
SPORTING INFORMATION: HAVE YOU FENCED BEFORE? IF SO, PLEASE GIVE DETAILS:
MEDICAL INFORMATION: DO YOU CONSIDER YOURSELF TO HAVE A DISABILITY?
YES NO
IF YES, WHAT IS THE NATURE OF YOUR DISABILITY:
DO YOU HAVE ANY MEDICAL OR PHYSICAL CONDITION PRECLUDING HEAVY EXERCISE?
YES NO
PLEASE DETAIL BELOW ANY IMPORTANT MEDICAL INFORMATION THAT OUR CLUE OFFICIALS/COACHES SHOULD BE AWARE OF E.G. ALLERGIES, EPILEPSY, ASTHMA, DIABETES ETC.
ARE YOU CURRENTLY TAKING ANY FORM OF MEDICATION THAT RELATES TO THE ABOVE?
DETAILS OF GP:
NAME:
ADDRESS:
SIGNATURE OF APPLICANT:
SIGNATURE OF PARENT / GUARDIAN / CARER, IF UNDER 18
DATE

PHOTOGRAPHS: FROM TIME TO TIME, PHOTOGRAPHS OF CLUB MEMBERS MAY BE USED TO PROMOTE THE CLUB IN THE LOCAL PRESS, MALLARD FACEBOOK GROUP (PRIVATE) OR ON OUR CLUB WEBSITE. IF YOU HAVE ANY OBJECTION TO THIS, PLEASE NOTIFY THE CLUB IN WRITING.

CHILD PROTECTION: MALLARD FENCING CLUB HAS ADOPTED THE BRITISH FENCING CHILD PROTECTION POLICY AND PROCEDURES WHICH ARE AVAILABLE TO ANYONE ON REQUEST, OR CAN BE SEEN ON THE CLUBS WEBSITE. THE COMMITTEE REQUIRES THAT ALL JUNIOR MEMBERS ARE DELIVERED TO AND COLLECTED FROM THE VENUE BY PARENTS/GUARDIANS,

OR BY PERSONS AUTHORISED BY THEM. PRIOR NOTIFICATION TO THE CLUB SHOULD ALWAYS BE MADE IN THOSE CIRCUMSTANCES

ALL CLUB MEMBERS MUST BE MEMBERS OF BRITISH FENCING ASSOCIATION AT THE APPROPRIATE LEVEL: www.britishfencing.com BFA NO: EXPIRY DATE:
EMERGENCY CONTACT DETAILS: PLEASE INSERT THE DETAILS RQUESTED BELOW TO INDICATE THE PERSON(S) WHO SHOULD BE CONTACTED IN THE EVENT OF AN ACCIDENT/EMERGENCY.
CONTACT NAME:
RELATIONSHIP:
TELEPHONE NO. 1:
TELEPHONE NO. 2:
DECLARATION BY PARENT/GUARDIAN/CARER
I UNDERSTAND THAT IN THE EVENT OF ANY INJURY/ACCIDENT/EMERGENCY, ALL REASONABLE STEPS WILL BE TAKEN TO CONTACT ME, AND TO DEAL WITH THAT INJURY/ACCIDENT/EMERGENCY APPROPRIATELY. I HAVE READ, FULLY UNDERSTOOD AND ACCEPT MALLARD FENCING CLUBS CONSTITUTION AND BYELAWS (AVAILABLE ON CLUB WEBSITE) I AM HAPPY THAT ALL DUE CARE AND ATTENTION IS TAKEN BY MALLARD FENCING CLUB IN RELATION TO THE SAFETY OF:
NAME OF CHILD:
SIGNATURE OF PARENT/GUARDIAN/CARER:
PRINT NAME:
DATE

WEB: www.mallardfencingclub.co.uk email: janeaclayton@hotmail.co.uk