WALLASEY ATHLETIC CLUB

(founded 1906)

Affiliated to: Northern Athletics, Merseyside County AA, Liverpool & District CCU Under UKA Rules

MEMBERSHIP APPLICATION FORM

Full Name (block letters)		
Address (block letters)		
Postcode		
Telephone Home	Mob	Date of Birth
Membership of other Athlo	etic Clubs (if applicable)	
Date of Resignation		
Name of First Claim Club		

Application for Membership

I hereby apply for membership to Wallasey Athletic Club. I agree to abide by the constitution and rules of the Club. I enclose the annual subscription of £...... which is payable to Wallasey Athletic Club.

The current rates of subscription are :- £30.00 if aged 18 or over; £20.00 if under 18 or in full time education/registered unemployed; £80.00 for Family Membership; 50% discount for 2nd claim members. Payment can be made by cheque made payable to Wallasey AC or preferably by direct transfer to the Club's account using sort code 20-50-36 account no 60911313 quoting your name as reference.

If you resign from Wallasey Athletic Club you must do so in writing and pay any outstanding subscriptions. If this is done you may join another Club but are not eligible to compete for that Club in team competitions or relay races until cleared by England Athletics. During this period you will be able to compete as an individual. Upon resignation from the Club, all equipment, trophies or any other property belonging to the Club must be returned to an officer of the Club.

(including the use of inhalers).			
Do you suffer from travel sickness?	YES/NO		
Do you suffer from any allergies?	YES/NO	(if Yes please list below	v)
The information given here will only be u	used if a proble	m arises during Club activ	ities.
	Signed Dat	e	Signature of
Parent/Guardian (if under 18)			
DATA SHARING WITH ENGLAND A	THLETICS		
When you become a member of or renergistered as a member of England Athle personal data which they will use to enable Athletics will contact you to invite you to things, allows you to set and amend your given, so that you can ensure that your date of you have any questions about the contact Athletics, please contact dataprotection. ATHLETE/PARENT AGREEMENT By returning this completed form, I contact data will be used and shared and am willing	etics (1 lyrs and ble access to are sign into and ure privacy setting ata is correct and inuing privacy penglandathletics.)	l over). We will provide En online portal for you (cal apdate your MyAthletics pogs). It is vital, therefore, that so that you can set your of your personal data whences.org.	ngland Athletics with your led my Athletics). England ortal (which, amongst other nat a valid email address is own privacy settings. In it is shared with England orivacy statement and how
FOR CLUB USE ONLY			
Membership Accepted/Not Accepted			
Name			
Address			
Date of Election			

Please state below if you suffer from any condition or illness that requires regular medication or freatment