

2012 DEAL TRI - Membership Form



www.dealtri.co.uk

Personal Details

Full Name _____

Home Address _____

Postcode _____

Home Tel. No _____

Mobile Tel. No _____

Email _____

Date of Birth _____

Gender Male Female

Ethnic Origin White Mixed Asian

Black Chinese Other

Disability Physical Learning None

Visual Hearing Other

Membership

DEDUCT £5.00 FROM SENIOR FEE IF NO UKA LICENCE REQUIRED
Existing senior members who marshalled at either a club or open event organised by Deal Tri during 2011 can deduct £10.00 from membership Subscription if renewal is by 31st January 2012.

PARENTS/GUARDIANS MUST SIGN A CONSENT FORM AND ENCLOSE WITH APPLICATION

Senior (16yrs +) £31.00

Students & Unemployed £13.00

1 Senior + 1 Junior* £35.00

2 Senior + 1 Junior * £66.00

* (+ £2 per subsequent Junior)

For multiple memberships, please complete a separate form for each person and staple together with payment. Please make cheques payable to: 'Deal Tri Limited'

We recommend that members join the British Triathlon Federation (BTF), for more information visit www.britishtriathlon.org.

BTF Membership Number: _____

First Claim Club (if not Deal Tri): _____

Emergency Contact

In the event of an emergency please provide contact details of a family member/ friend. Compulsory for those aged under 16yrs.

Full Name _____

Relationship _____

Mobile No _____

Landline No _____

Important Information

Should you deem it necessary please provide full information regarding your medical condition (including current medication) cultural issue, level of disability using a separate piece of paper. We ask that you have a full medical check before joining.

From time to time club members may be filmed [photographic and / or video images]. If you do **NOT** wish to be included in any team photos or publicity materials such as; poster campaigns, flyers or websites, please tick here: []

Personal information in this form is required for club administration and in the interest of your safety should an emergency occur.

All details will be handled in a secure and confidential manner in accordance with the Data Protection Act legislation. If you do **NOT** wish your name and details to be printed in club listings or shown on the club website (i.e. news, results, etc.) please tick here: []

Signature

I have read and agree to adhere to the following club documents: which are available to download from www.dealtri.co.uk or on request

1) Equality & Anti Bullying Policy

2) Codes of Conduct

3) Child & Vulnerable Adults Protection Policy

4) Photographic Policy

5) Health & Safety Policy

I agree to notify the club committee of any changes in my medical condition. In the event of an injury whilst participating in club training sessions/ competitions, I hereby give consent to receive medical attention.

I agree to marshal at the following events this season (minimum of 1)

- | | |
|---|---|
| <input type="checkbox"/> Deal Half Marathon | <input type="checkbox"/> Spring Aquathon |
| <input type="checkbox"/> Fun Kids Triathlon | <input type="checkbox"/> Dover Sprint Triathlon |
| <input type="checkbox"/> Dinosaur 10km | <input type="checkbox"/> Deal 5 Miler |
| <input type="checkbox"/> 2012 Bra Run | |

Signature _____

Print Name _____

Must be a Parent/Guardian if under 16years

Please write your nomination for the 'Ada Wray Trophy'

(Club Person of the Year) and return before the 15th January.

Name: _____

**Please return completed forms to:
Lionel Wray – Membership Secretary
25 Churchill Avenue
Walmer
Deal. CT14 7SP**

The membership secretary can be contacted via the website
Or by e-mail on: lionelwray@btinternet.com
Telephone: 01304 369143



www.dealtri.co.uk

Parental or Guardian Consent Form 2012

I

I _____ am the Parent or Legal Guardian and hereby give my permission for:

_____ and _____ and _____

to take part in training and race activities organised by Deal Tri during the year 2012, and accept that Deal Tri cannot be held responsible for any accident resulting in injury or loss of life or for any damage to personal property whilst taking part in any activities. I also certify that the person named is in good health and able to take part in vigorous physical activities. We recommend a medical check prior to joining our Club for all members.

Furthermore I agree to attend training sessions with my child, and to marshal or assist at one of the 2012 Deal Tri open events. Please note that we do expect parents and legal guardians to stay on site whilst their juniors are training or racing.

Signed _____ Date _____

Please return with 2012 Membership Form and correct fee to:

Lionel Wray, 25 Churchill Avenue, Walmer, Deal, Kent CT14 7SP