

Redditch Road & Path C.C.

Membership Application Form Year 2010



I/We wish to become a 1st/2nd claim member of the Redditch Road and Path Cycling Club and agree to abide by its rules.

Signed _____ Date _____

PARENTS / GUARDIAN TO SIGN CONSENT FOR TEENAGER APPLICATIONS

Proposed by _____ Seconded by _____

	Self	Partner	Type of membership	
Title:				Fees (payable each January) Please tick
First Name:			SENIOR	£10
Surname:			OVER 60'S	£4.50
DOB:			TEENAGERS 13 – 17 yrs Incl.	£5
Address:			FAMILY Husband and Wife Parents & Children up to & Incl.12yrs	£12
			2nd CLAIM MEMBER	£10
Post Code:			INITIAL JOINING FEE	£5
<i>Please detail overleaf any important personal disability / medical condition which the Club / Club Coaches should be aware of (e.g. epilepsy, asthma, diabetes, etc.)</i>				
PARENTS WHO DO NOT WISH THEIR CHILDREN TO BE SHOWN ON THE CLUB'S WEBSITE PLEASE SIGN BELOW. SIGN :-			<i>Please make cheques payable to 'Redditch Road & Path Cycling Club'</i>	
Home phone		Mobile phone		
Work phone		email		

Children			
Name	DOB	School	Age on Jan 1st

Particular Cycling interest

Touring	Road Racing	Cyclo Cross	Hill climbs	
Track Racing	MTB	Time Trials	Down Hill	
Circuit Racing	BMX	Other:		

The Committee would like to bring to your attention that, as a Club Member, you may take out insurance through either The BC or the CTC. See either Treasurer or Secretary.