



APPLICANT'S DETAILS

First Name:

Surname:

Date of Birth:

Male

Female

School Name:

Year:

Are You a Member of Any Other Running or Sports Clubs: (If yes please state club name)

Preferred Event(s): (Please list in order of preference if more than one)

Medical Conditions / Allergies: (Please do not leave blank. If there is no information please write 'None')

PARENT / CARER DETAILS

First Name:

Surname:

Address:

Postcode:

Home Telephone Number:

Mobile Telephone Number:

E-mail Address: (please print clearly)

MEMBERSHIP FEES

I wish to apply for membership of HINCKLEY RUNNING CLUB Juniors and agree to be bound by the rules of the club and the athletic organisations to which the club is affiliated.

I agree to pay an ANNUAL MEMBERSHIP fee of £12.50 (for period effective 1st Jan to 31st Dec 2013)
(+ £1.00 weekly subs for Winter Indoor Training)

A telephone list will be produced from the above information, which will be made available to all Junior members. The above information will not be disclosed for anything other than HINCKLEY RUNNING CLUB activities. Should you wish **NOT** to have your name on this list please tick the box.

An e-mail address list will be produced from the above information, which will be made available to all Junior members. The above information will not be disclosed for anything other than HINCKLEY RUNNING CLUB activities. Should you wish **NOT** to have your name on this list please tick the box.

APPLICANTS SIGNATURE

PARENT / CARER SIGNATURE

DATE