

SOUTHPORT WATERLOO ATHLETIC CLUB

(Affiliated to England Athletics and UKA)

Membership Application Form

NAME ADDRESS AND CONTACT NUMBERS

About you

First Name(s)		Title	
Last Name		Gender M/F	
Address Line 1		Date of Birth	
Address Line 2			
Town		Current School (if any)	
County			
Post Code			

How we can contact you

Home Telephone		Mobile Phone	
Work Telephone		Fax	
E-mail			

Contact in an emergency

Contact name		Emergency 'phone number.	
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PARTICIPATION

What kind of events do you expect to participate in? (✓)

Sportshall Athletics	Track & Field	Cross Country	Road Running	Race Walking	Fell & Hill
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Membership of another athletic club

Name of any previous club		Status ie first or second claim		Date of resig'n from prev club	
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If you, or someone associated with you, would like to help within the club, please indicate (✓)

Name	Help coaching	Help in team management	Help at Track & Field events	Help at Road Races	Help in Club Administration
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you are, or the person named above is, already a coach and willing to coach Southport Waterloo athletes, please indicate (✓)

Event(s)		Coaching Ref	
Level		Date of expiry	

If you are already an athletics official please indicate (✓) and advise current grade

Timekeeper	Track Judge	Field Judge	Starter	Marksman	Ancillary
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

OTHER INFORMATION ABOUT YOU

If you consider yourself to have a disability, please indicate the nature of that disability. For example, you may wish to use terms 'visually impaired', 'hearing impaired', 'physical disability', 'learning disability', 'multiple disability' etc

Other medical information. Please detail in the box below any important medical information we should be aware of. For example, please indicate if you suffer from epilepsy, asthma, diabetes etc. All medical information will be treated confidentially but we may pass information to the athlete's coach and / or team manager.

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Membership is open to all groups in the community. In order to help the club monitor its membership, can you please select your ethnic origin from the list below (✓)

White British	Black Caribbean	White & Black Caribbean	Asian Indian	Chinese
White Irish	Black African	White & Black African	Asian Pakistani	Other ethnic group
White other	Black other	White & Asian	Asian Bangladeshi	Asian other

APPLICATION AND CONSENT

Application

I wish to become a first claim member of Southport Waterloo AC. I confirm that I am eligible to compete under UK Athletics rules. I *agree / *do not agree to the use of photographs including me being used on the Club's web site or in material promoting the club. I understand that my personal data will be held by the club on a computer and will be disclosed to England Athletics as part of the sport's athlete / volunteer registration scheme.

Signed Date
 (to be signed by parent or guardian if under 16) *Delete as applicable.

Parental consent (Required, for example, for members under 16 years of age)

By returning this completed form I agree to the applicant in my care taking part in the activities of the club.

Name of parent / guardian

Signature of parent / guardian Date

Southport Waterloo AC recognises the need to ensure the welfare and safety of all young people in sport. We have a Child Protection Policy in place and a copy will be provided on request.

We also have a policy on the use of photographs, videos and other images and ask that you let us know if you do not want your child's photograph or other image appearing on the web site of Southport Waterloo AC or in any material used for promoting the club.

We will take all steps to ensure images are used only for the intended purpose. If you become aware of images being used inappropriately you should inform the Secretary or Ann Howgego (01704 540424), Child Protection Officer of Southport Waterloo AC, immediately.

General Secretary:

Chris Henders
 28 Eastbourne Rd
 Waterloo
 Liverpool
 L22 6QT
 0151 286 0181

Membership Secretary:

Susan Cooper
 15 York Close
 Formby
 Merseyside
 L37 7HZ
 01704 871898

Annual subscriptions:

(Please send or hand in with this form.)
 Under 11s £1
 Under 17 £7 + £5* = £12
 17 – 18 £8 + £5* = £13
 19 & over £12 + £5* = £17

Treasurer:

Peter Roome
 26 Berwick Drive
 Crosby
 Liverpool
 L23 7UH
 0151 932 1643

* England Athletics registration fee for athletes aged 11 and over. Not payable by volunteers.

Ver 7 – Jan '11

FOR CLUB USE:

Date of election

Secretarysubs paidm/card issuedAbout Us issued