

FALMOUTH ROAD RUNNERS

Western Terrace, Falmouth

Membership Application Form

We are very pleased to welcome you to the Falmouth Road Runners. To ensure that we have the correct details for you, please insert the information requested below and return this form to the Club Membership Secretary with your subscription money and joining fee. We will use this information to inform you about club events, for affiliation to England Athletics, and if you intend to race, for entry purposes.

PERSONAL DETAILS

Name: Title:

Address:

..... Postcode:

Home Telephone No: Mobile:

Email:

Gender: Male Female Ethnicity: Date of Birth*:.....

Signature: Date:

Please tick to confirm that you're happy for us to store this information and share it with England Athletics and Race Directors (as required)

MEDICAL INFORMATION

Please detail below any important medical information that our Coaches/Leaders/Club Captain should know and be aware of, (e.g. epilepsy, asthma, diabetes, etc)

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RUNNING EXPERIENCE (including when)

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EMERGENCY CONTACT DETAILS

Please insert the information below to indicate the person(s) who should be contacted in the case of an incident/accident:

Contact Name:

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Emergency Contact Number/s:

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*Minimum age 16 years. **Bank Details** for BACS payment:- Lloyds, Sort Code 30-96-26, Account Number 42671868. Please ensure you include your surname and 'MEM' as your reference.