



APPLICANT'S DETAILS

First Name:

Surname:

Date of Birth:

Male

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Female

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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 organization's to which the club is affiliated.

I agree to pay an ANNUAL MEMBERSHIP fee and when applicable + £1.50 weekly subs for Winter Indoor Training

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£ 30.00 1st Child

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£ 20.00 Additional Child

Please state name of 1st child when this membership form is for an additional child

A telephone and email address list will be produced from the above information which will be used by the membership secretary only and will not be disclosed for anything other than activities relating to the Junior's section of Hinckley Running Club.

APPLICANTS SIGNATURE

PARENT / CARER SIGNATURE

DATE