



# BINGLEY HARRIERS & AC

# APPLICATION FOR MEMBERSHIP

I WISH TO APPLY FOR MEMBERSHIP OF BINGLEY HARRIERS & ATHLETIC CLUB.  
I AM AN AMATEUR AND ABIDE BY THE ELIGIBILITY RULES OF UKA ATHLETICS.

### PERSONAL DETAILS:

NAME: \_\_\_\_\_ MALE  FEMALE

ADDRESS: \_\_\_\_\_  
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COUNTY: \_\_\_\_\_ POSTCODE: \_\_\_\_\_

HOME TEL: \_\_\_\_\_ MOBILE TEL: \_\_\_\_\_  
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EMAIL: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ PLACE OF BIRTH: \_\_\_\_\_  
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NATIONALITY: \_\_\_\_\_ DATE OF ENTRY INTO UK: \_\_\_\_\_

EMERGENCY CONTACT: \_\_\_\_\_ MOBILE TEL: \_\_\_\_\_

### MEMBERSHIP DETAILS:

#### FULL YEAR (IF JOINING BETWEEN JANUARY 01 AND SEPTEMBER 30)

<b>FAMILY</b> £15 <small>PLUS £15 AFFILIATION FEE PER COMPETING FAMILY MEMBER</small>	<input type="checkbox"/>	<b>SENIOR</b> £30	<input type="checkbox"/>	<b>PENSIONER</b> £20	<input type="checkbox"/>	<b>UNDER 18</b> £20	<input type="checkbox"/>	<b>STUDENT</b> £20	<input type="checkbox"/>
<b>SECOND CLAIM</b>	£15	<input type="checkbox"/>	£5	<input type="checkbox"/>	£5	<input type="checkbox"/>	£5	<input type="checkbox"/>	<input type="checkbox"/>

#### PARTIAL YEAR (IF JOINING BETWEEN OCTOBER 01 AND DECEMBER 31)

<b>FAMILY</b> £7.50 <small>PLUS £15 AFFILIATION FEE PER COMPETING FAMILY MEMBER</small>	<input type="checkbox"/>	<b>SENIOR</b> £22.50	<input type="checkbox"/>	<b>PENSIONER</b> £17.50	<input type="checkbox"/>	<b>UNDER 18</b> £17.50	<input type="checkbox"/>	<b>STUDENT</b> £17.50	<input type="checkbox"/>
<b>SECOND CLAIM</b>	£7.50	<input type="checkbox"/>	£2.50	<input type="checkbox"/>	£2.50	<input type="checkbox"/>	£2.50	<input type="checkbox"/>	<input type="checkbox"/>

ARE YOU A MEMBER OF ANOTHER UK CLUB?: YES  NO  ARE YOU APPLYING FOR SECOND CLAIM MEMBERSHIP? YES  NO

ARE YOU APPLYING FOR HIGHER COMPETITION CLUB MEMBERSHIP? YES  NO

PREVIOUS / OTHER CLUB: \_\_\_\_\_ DATE OF RESIGNATION: \_\_\_\_\_  
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REASON: \_\_\_\_\_  
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PLEASE TICK HERE IF YOU WISH TO APPLY FOR A NON-COMPETITIVE MEMBERSHIP:

WHICH OF THE FOLLOWING EVENTS DO YOU EXPECT TO COMPETE IN?

<b>TRACK &amp; FIELD</b>	<input type="checkbox"/>	<b>CROSS COUNTRY</b>	<input type="checkbox"/>	<b>ROAD RUNNING</b>	<input type="checkbox"/>	<b>FELL RUNNING</b>	<input type="checkbox"/>	<b>RACE WALKING</b>	<input type="checkbox"/>
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MEDICAL CONDITIONS THE CLUB MAY NEED TO KNOW ABOUT? \_\_\_\_\_  
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PHOTOS OF ATHLETES MAY BE USED FOR PUBLICITY AND PROMOTIONS, DO YOU HAVE ANY OBJECTIONS TO THIS? YES  NO

I AGREE TO CONFORM TO AND BE BOUND BY THE RULES AND OBSERVE THE CODE OF CONDUCT AND POLICIES OF BINGLEY HARRIERS AND ATHLETIC CLUB AND UNDERSTAND THAT THIS INFORMATION WILL BE STORED ON A COMPUTERISED SYSTEM AND SHARED WITH ENGLAND ATHLETICS.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

PLEASE RETURN THIS FORM AND PAYMENT (CHEQUES ONLY, PAYABLE TO BINGLEY HARRIERS & AC) TO:  
3 GHYLL FARM, MILL LANE, BRADLEY, KEIGHLEY. WEST YORKSHIRE BD20 9EE