



Hastings and District Canoe Club Membership form

Personal Details:

Name:

Gender:

Date of Birth:

Address:.....

.....

.....

Postcode:

Tel (h):

Tel (w):

Tel (m):

E-mail:

Paddle UK membership number:.....

Medical/ Injury Details:

Detail any medical conditions/ allergies that we should be aware of:

.....

Details of medication that must be administered:

.....

Past or current injuries that we should be aware of:

.....

These details may need to be passed onto the coach or competent paddler in charge.

Emergency Contacts:

Name:

Relationship:

Tel (m):

Tel (h):

Tel (w):



Membership Fees:

Member:	Fee:	Please tick:
Adult	£70	
Students	£35	
Child	£35	
Social	£15	
Non Bcu Adult	£4	
Child	£2	
Boat Storage/Hire	£0	
Total	£	

Payment by Cash / Cheque or BACS:

Account number: 62181580,
Sort Code: 60-10-15,
Account Name: Hastings & District Canoe Club

I have read and agree to abide by the rules and regulations of Hastings & District Canoe Club. A Copy of the rules and regulations are available in the clubhouse.

I am aware of the fact that it is for my own safety and that of other paddlers to declare any relevant medical conditions. I will inform the paddler in charge of the session.

Canoeing and kayaking are assumed risk sports. When taking part, you are assumed to be aware and accepting of the risks associated with these sports. The person mainly responsible for your safety is you. If you do not adhere to the club's safety policy, and follow instructions from the paddler in charge, you may be putting yourself, or others, at risk.

I agree to these details being kept on a computer file to facilitate club administration. Please note that all your details will be available to committee members and you can select which details to share with other members via the HDCC website.

Your details will be passed to Paddle UK to activate your Club Associate membership unless you tick here

Signed: Date:

For members under 18:

Parent or Guardian Name (block capital):

Tel (h):if different from above

Tel (w):

Tel (m):

E-mail:

Signed:Date:.....