



www.mccarkissenduranceproject.co.uk

MEMBERSHIP APPLICATION FORM

(1st April 2016 to 31st March 2017)

PART 1

MCCARKISS ENDURANCE PROJECT welcomes applications from all members of the community and will ensure all present and potential members receive fair and equal treatment.

Please complete all relevant information below and return this form with relevant membership fee to the Membership Secretary or any Club Official. Alternatively the form may be posted to The Membership Secretary, McCarkiss Endurance Project at 80 St. Wulstan Way, Southam, Warwickshire, CV47 1TU.

PLEASE NOTE: Minimum age for membership is 18 years.

PERSONAL INFORMATION

Title:	Sex: Male / Female	Date of Birth:
First Name:	Surname:	
Address:		
Post Code:		
Telephone No:	Mobile (if different):	
Email Address:		

MEDICAL INFORMATION

Please detail below any important medical information that our coaches should be aware of (e.g. epilepsy, asthma, diabetes etc.)

DISABILITY

Do you consider yourself to have a disability: YES_____ NO_____

If yes, what is the nature of your disability (eg visually impaired, hearing impaired, physical disability, learning disability, multiple disability):

EMERGENCY CONTACT DETAILS

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

Emergency Contact name: _____

Emergency Contact Number: _____

PART 2

SPORTING INFORMATION

Have you taken part in athletics before? YES____ NO____

If yes, please indicate below where.

Primary school _____ Secondary school _____ Club _____

Other _____

Disciplines in which you expect to participate (Please Circle)

Road Running / Track & Field / Cross Country / Hill & Fell Running / Race Walking

Do you hold any Coaching Qualifications? YES/NO

If yes, please detail: _____

MEMBERS OF OTHER ATHLETIC CLUBS ONLY TO COMPLETE THIS SECTION

Your other Clubs name: _____

Do you intend to resign from the above Club? YES / NO

Date of Resignation: _____

Do you intend to join MCCARKISS ENDURANCE PROJECT as Second Claim? YES / NO

TO BE COMPLETED BY ALL APPLICANTS:

I confirm that I am eligible to compete under UKA Rules.

I accept*/do not accept* that my personal data will be held on computer data base by the Club.

I agree*/do not agree* to the disclosure of my personal data in a list of members to England Athletics.

(*Please delete as applicable).

I agree to abide by MCCARKISS ENDURANCE PROJECT Codes of Conduct and Track Etiquette; copies are available on the Club website.

SIGNED _____

DATE _____

MEMBERSHIP FEES

FIRST CLAIM SENIORS - £20.00

SECOND CLAIM SENIORS - £10.00

Bank Transfer payments can also be accepted, please contact membership@mccarkissenduranceproject.co.uk for further details.

Paypal payments can be made to membership@mccarkissenduranceproject.co.uk (please include your name as a payment reference)

If any members membership lapses on the 15th June their EA Registration will lapse and they will be removed from the EA portal and have their competition licence withdrawn.

In addition if the athlete wishes to re-join the Club at any future date they will be charged a "Registration Fee" which will be an additional charge of £10.