



Tornado

Road Cycling Club



Membership Form 2017

First Name: _____ Surname: _____

Address: _____

Postcode: _____

Phone Number (Home): _____ Mobile: _____

E-Mail Address: _____

Date of Birth: _____ Tick if under 18 yrs old Sex: Male / Female

Please list below any medical conditions and medication that we should be aware of:

I fully accept that neither the Club, nor its officers nor its committee shall be in any way liable for any injury, to person or property, sustained in any of the Clubs activities:

Signature: _____ Date: _____

Membership Fees: 1st claim: Members racing under the Tornado RCC name and where Tornado RCC is your main / only club. - £20 each.

2nd claim: For members not racing under the Tornado RCC name, belonging to another club for this purpose - £15 each.

1st Claim 2nd Claim

Note: Priority given to 1st claim members where club activities are limited by numbers.

Please complete the form and return to:

Mrs E. Wyeth, Wisteria Cottage, 14 Wiltshire Road, Bransgore, Christchurch, BH23 8BH

Please make cheques payable to Tornado RCC.

If you have ticked yes to being under 18 years of age, please obtain parental consent:

I _____ here by give consent to the above named child applicant taking part in the Club and fully understand that the Club, its officers and committee will in no way be held liable for any injury to person or property sustained during such activities and that members of 12 years of age and under shall at all times be accompanied by either a parent or carer.

Parent Signature: _____ Date: _____

The information you have provided will be held for administration purposes only, will be seen only by club officials and held in accordance with the Data Protection Act. By supplying this personal information you have given your consent for the club to hold and use it for this purpose.