

Leicester Rowing Club

Member Information & Health Screening



Personal Information: BLOCK CAPITALS PLEASE

Title:

Full Name:

Gender:

Date of Birth:

Address:

Post Code:

(For all members under 18 please provide parent or guardian contact information)

Contact Telephone Number: (preferably mobile)

E-mail Address:

Emergency Contact Details:

Name of Contact:

Relationship to Participant:

Emergency Contact Number: (preferably mobile)

Membership Category

I wish to JOIN / RENEW membership at the following level: (Please tick ONE category below)

Category PLEASE TICK	% Of Full	Full Year 2017/18	Monthly Standing Order	Payment Option Delete as appropriate
Full Membership	100%	£300	£26	Full Payment* OR Standing Order
Unwaged (18+)	70%	£210	£19	Full Payment* OR Standing Order
Under 18	50%	£150	£14	Full Payment* OR Standing Order
Recreational	50%	£150	£14	Full Payment* OR Standing Order
Cadet (under 14)	25%	£75	N/A	Full Payment Only*
Cox	15%	£45	N/A	Full Payment Only*
Social	10%	£30	N/A	Full Payment Only *
Learn 2 Row Course	N/A	N/A	N/A	Full Payment Only*

* Full Payment - please indicate method of payment – Cheque / Bank Transfer

Swimming Ability – I can confirm that I can:

Swim 50 meters in light clothing

Swim 5 meters underwater in light clothing

Tread water for 2 minutes in light clothing

I have successfully completed a capsized drill:

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Health Questionnaire

1. Do you suffer from any long-term health condition?

If Yes, please provide details:

2. Do you suffer from any other condition that may affect your ability to row safely?

If so please provide details:

3. Do you have any health condition, impairment or disability of which Leicester Rowing Club should be aware?

Please sign and date below – electronic return will be considered as signed.

I agree to abide by the Club Constitution, Bylaws, Policies and Codes of Conduct at present in force, or as may be altered, suspended or repealed from time to time. Copies of current versions of these documents can be found in the Members area on the club website.

I understand that rowing involves strenuous exercise and that the information provided on this form is important in assessing the risks associated with my participation in the activities at Leicester Rowing Club. I confirm that the information provided on this form is true to the best of my knowledge and I commit to keeping Leicester Rowing Club updated if it changes.

I acknowledge that Leicester Rowing Club is entirely run by volunteers and accept that in becoming a member I will be asked to volunteer some of my time to the club and its events.

Signed:

Date:

In the event of an applicant being under the age of 18, this form must also be signed by a

parent or guardian, who in addition to countersigning the accuracy of the information provided and the statements above, should also sign to agree the statement below:

I agree to my child taking part in the activities of the club and I agree to adhere to the code of conduct for parents/guardians. I will endeavor to ensure that my child adheres to the code of conduct for junior members.

Signed:

Date:

Print Name:

Relationship to Participant:

Data Protection

Leicester Rowing Club will hold the information provided on this form electronically. It will only be used to contact you about LRC matters; it will not be provided to any third party or other organization.

Completed forms to be posted in the red box in the committee room marked FAO: Nicola Henry

Alternatively email to: membership@leicester-rowing.co.uk