



ELY ROLLER SKATING CLUB

MEMBERSHIP APPLICATION FORM - 2019/2020

Please write clearly (e.g. BLOCK CAPITALS)

Type of membership (*Delete as appropriate):

- | | |
|----------------------------|---------|
| *Senior - Aged 18 and over | £ 10.00 |
| *Junior - Aged under 18 | £ 10.00 |

NAME: _____

ADDRESS: _____

EMAIL: _____

TEL NO. HOME: _____

DATE OF BIRTH: _____

CONTACT NAMES/NUMBERS (in case of emergency):

1) _____

2) _____

FARS NO:

Artistic Qualifications:

Figures:

Free:

Dance:

Are there any medical conditions that should be known about you/your child Yes/No

If yes, please give brief details (use a separate sheet if necessary):

.....

I/We have read and agree to observe and be bound by the Club Rules and the applicable Codes of Conduct for Children/Parents/Volunteers and accept any decision made by the Committee.

PDF copies of Club Rules and Codes of Conduct are available on the Ely Roller Skating Club website "Documents and Forms" page (<http://www.elyrsc.co.uk/forms.html>)

SIGNED: **DATED:**

(To be signed by Parent/Guardian if under 18)
