



**Chairman**  
 Gordon Smith  
 19 Windsor Road  
 Newark  
 NG24 4HS



www.newarkcanoecub.org.uk

# MEMBERSHIP FORM

NAME (1ST MEMBER): \_\_\_\_\_ DATE JOINING: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

POST CODE: \_\_\_\_\_ TEL: NO: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

NUMBER OF PEOPLE JOINING: \_\_\_\_\_ B.C. MEMBER/S: YES/NO

B.C. NUMBER/S: \_\_\_\_\_

NAMES OF ADDITIONAL / FAMILY MEMBERS JOINING (& DOB, GIVING B.C. NUMBERS AND AWARDS ACHIEVED WHERE APPLICABLE. USE A SEPARATE SHEET IF NEEDED):

	DATE OF BIRTH: _____
	DATE OF BIRTH: _____
	DATE OF BIRTH: _____

DO YOU HAVE ACCESS TO THE INTERNET? YES / NO

EMAIL ADDRESS: \_\_\_\_\_

It is important for us to have an email address on file as we will use this is the primary method of keeping you up to date with the latest club news, trips, social events and other important information

**FEES TO BE INCLUDED WITH THIS APPLICATION FORM:**

MEMBER TYPE	NON BC MEMBER	BC MEMBER	TICK IF APPLICABLE
FULL ADULT	£35	£33	
SECOND ADULT	£25	£23	
STUDENT (over 18 years of age but in full time education)	£15	£14	
JUNIOR (under 18 years of age)	£15	£14	
FAMILY (two adults with parental responsibility and any number of junior members)	£75	Minus £2 for every adult BC member and £1 for every junior BC member	
SOCIAL	£5	n/a	

**CANOEING/KAYAK INTERESTS: (DELETE AS NECESSARY)**

RECREATION / FLAT WATER / WHITE WATER / SLALOM / RACING/ SURFING/ WINDSURFING.

**KAYAK/CANOEING AWARDS HELD: (CIRCLE AS NECESSARY)**

Canoe: 1 STAR / 2 STAR / 3 STAR / 4 STAR / 5 STAR

Kayak: 1 STAR / 2 STAR / 3 STAR / 4 STAR / 5 STAR

**COACHING AWARDS: (PLEASE GIVE DETAILS)** \_\_\_\_\_

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**HAVE YOU OR ANY FAMILY MEMBER TAKEN AND PASSED ANY OF THE FOLLOWING COURSES:**

FULL FIRST AID COURSE: YES/NO State Type (e.g. FAW)

IF YES EXPIRY DATE: \_\_\_\_\_

B.C. AQUATIC FIRST AID COURSE: YES/NO

IF YES EXPIRY DATE: \_\_\_\_\_

B.C. 7 HOUR FIRST AID COURSE: YES/NO

IF YES EXPIRY DATE: \_\_\_\_\_

FOUNDATION, SAFETY & RESCUE: YES/NO

DATE TAKEN: \_\_\_\_\_

**PLEASE SEND A PHOTO COPY OF ALL AWARD CERTIFICATES HELD. (UPDATES ONLY FOR OLD MEMBERS)**

**DO YOU OR ANY MEMBER JOINING SUFFER FROM: (GIVE DETAILS WHERE POSSIBLE)**

- |    |  |        |       |
|----|--|--------|-------|
| A. | EPILEPSY   | YES/NO | _____ |
| B. | DIABETES   | YES/NO | _____ |
| C. | EAR DISORDERS  | YES/NO | _____ |
| D. | RESPIRATORY DISORDER                                       | YES/NO | _____ |
| E. | ALLERGIES (BITES/STINGS)                                   | YES/NO | _____ |
| F. | HEART CONDITION  | YES/NO | _____ |
| G. | ANY OTHER CONDITION/DISABILITY - PLEASE GIVE DETAILS BELOW |        |       |
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PLEASE RETURN THIS FORM AND REMITTANCE MADE PAYABLE TO:

**NEWARK CANOE CLUB** AND SEND TO:

**David Hodson, 28 Kenyon Close, Heighington, Lincoln, LN4 1GJ**

**DECLARATION**

Upon acceptance into the Newark Canoe Club I/we understand that canoeing and windsurfing are undertaken at my/our own risk. I confirm that I/we have completed this form accurately and to the best of my/our knowledge. I/we agree to abide by the rules of the Lake and Club Constitution and Regulations.

SIGNED: \_\_\_\_\_

**PLEASE ATTACH PHOTOGRAPH(S) OF ALL MEMBERS JOINING FOR IDENTITY PURPOSES - THANK YOU**  
**(THIS CAN BE FROM YOUR FAMILY ALBUM)**