



Selby Cycling Club

Membership Application Form

Applicant details

Surname

Forename(s)

Date of Birth

Home Address

Line 1

Line 2

Town

Post code

e-mail address

Home Phone no:

Mobile no:

Occupation

Emergency Contact Name

Relationship to Applicant

Emergency Contact No:

Type of Membership

Tick

Full

£10.00

Junior

Free

2nd Claim

£5.00

Name of 1st Claim Club

From

To

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Disability

The Disability Discrimination Act 1995 defines a disabled person as anyone with, " a physical or mental impairment, which has a substantial and long term adverse effect on his or her ability to carry out normal day-to-day activities"

Do you consider yourself to have a disability -

Yes / No

Medical

Please detail below any important medical information that our club should be aware of (e.g. epilepsy, asthma, diabetes, a recent injury, etc.) Medical condition/s and recommended treatment/actions to be taken if symptoms appear: if you have any concerns about yourself / child participating in any form of physical activity then please consult your GP before consenting for yourself / child taking part in cycling activity sessions.

Medical details that could affect your ability to ride with the club:

I, _____, agree to fully comply with all the current rules of SCC

Signature of applicant

Once completed please either:

It is preferable to complete the online application. If required this form may be sent by post to Selby Cycling Club at:

The Old Bakery
Rythergate
Cawood
Selby
YO8 3TP

Date:

Payment can be made by Bank Transfer or Paypal (inc. debit and credit card). If you prefer to pay by another method, email membership@selbycycling.co.uk

Bank Transfer Details

Ref: Your Name -Membership
HSBC - Selby Cycling Club
Sort code: 40-40-29
Acc. No: 31042246

Paypal Details

Send via Paypal to membership@selbycycling.co.uk.
Please give your name as a reference

Do you have any first aid qualifications?

Junior Applicants and Parents/Guardians must read items below

It is necessary to obtain consent for your child to take part in Selby Cycling Club activities. If you wish your son / daughter to participate then please read and complete the separate document 'SCC Form of Authority' and sign the Parental Consent Notice. Any information provided about your child will be kept confidential and secure. Any questions can be directed towards the SCC Child Welfare Officer, Nicola Lines via info@selbycycling.co.uk.