

## Membership Application Form to Join TeamBathAC

Surname:		Forename/s:					
Age:		Date of birth:		Place of birth:			
<b>Athletic Interests (please tick those you are interested in)</b>							
Road Running	Track	Field	Cross country	Triathlon	Fell	Coaching	Other – please state what
<b>Membership Category (please tick appropriate category)</b>							
<b>Category</b>		<b>Tick Relevant Category</b>		<b>Club Fee</b>	<b>England Athletics Fee * (see notes)</b>		<b>Total Payable</b>
Under 11 years of age				£5.00	Not applicable		<b>£5.00</b>
11 but under 18				£10.50	£5.00		<b>£15.50</b>
18 and over				£19.00	£5.00		<b>£24.00</b>
Full time student				£10.50	£5.00		<b>£15.50</b>
Over 60				£10.50	£5.00		<b>£15.50</b>
Family** (see notes)				£36.00	£5.00 per person over 11		<b>£36.00+</b>
Non-competing member*** (see notes)				£3.50	Not applicable		<b>£3.50</b>
<p>Notes: Membership is due on the 1<sup>st</sup> April every year. After 1<sup>st</sup> September the club fee payable is calculated depending on the number of months left until April but the full Midland fee has to be paid regardless of when you join.</p> <p>* The England Athletics Fee has to be paid annually by the Club to England Athletics</p> <p>**Family membership covers two adults and their children under the age of 18 years. Each family member over the age of 11 years has to pay the England Athletics Registration fee.</p> <p>*** *The Non-competing member category is intended for someone who wishes to be associated with the Club but who does not train or compete.</p>							
<b>Family Members</b>		<b>Forenames</b>		<b>Age</b>	<b>Date of Birth</b>		
Address:							
					Post Code:		
Home Phone No:		Work/Mobile Phone No:		Email Address:			
Are you a member of another Athletic Club?      Yes/No				If yes - which club?			
Please give details of any medical condition/s that officials/coaches of the Club should be aware of.							
Emergency contact point (in case we need to contact someone when you are training with us)				Phone number and name:			
Please sign:				Date signed:			
If applicant is under 16 years of age the signature of a parent or guardian is also required.							
Parent/Guardian signature					Date signed:		
Proposed by:					Date signed:		
Seconded by:					Date signed:		
Are you happy to be contacted by email for official club business (e.g. AGM)					Yes/No		
<b>Below is for official use only</b>							
Date elected:		Membership Number:		Card sent:			
Please complete form and return with payment to: Sue Brigden, 2 Railway Terrace, Shoscombe Vale, BA2 8NF, Tel 01761 432 426, Email <a href="mailto:sue@teambathac.org">sue@teambathac.org</a> . Cheques payable to "TeamBathAC"							