



TRI TEAM GLOS MEMBERSHIP APPLICATION AND RENEWAL

Membership number for existing members _____

Personal details

First name: _____ Surname: _____
Address: _____
Postcode: _____ DOB: _____
Email: _____
Contact no: _____ Gender: _____
Ethnic group: _____ Are you registered disabled? Please delete. Y / N

Have you a medical condition that the Club should be aware of? Please delete. If yes, please give details. Y / N

Emergency contact details

Name: _____ Relationship: _____
Home tel: _____ Mobile: _____

The Club keeps electronic records. Do you have any objection to your details being held? Please delete: Y / N

Membership fees (please circle)	Age	WHOLE YEAR	PRORATA DATES	
		April–March	Aug–March	Dec–March
Senior	Over 21	£40.00	£27.50	£16.50
Junior	17 – 21	£35.00	£22.50	£14.00
Youth	15 – 16	£27.00	£20.00	£12.50
Unwaged		£27.00	£20.00	£12.50

Payment can be made as follows: Amount: £

- Post form and cheque payable to "Tri Team Glos", to Paul Yeatman, 6 Olive Close, Longford, Gloucester, GL2 9FH
- Transfer fees to TTG bank account and email form to paulyeatman1127@btinternet.com
Acct name: Tri Team Glos
Acct no.: 03781800
Sort code: 30-93-48
Reference: MEM<surname>

In joining the Club I commit to make every effort to support the Club by being available to marshal at the following event: The events are the Club's primary means of income throughout the year and it is imperative they are well supported by the membership.	TTG Duathlon April 2017 (TBC)
	TTG Gloucester Triathlon May 2017 (TBC)

The club newsletter is sent quarterly. By taking an electronic copy, you will be helping to keep costs down. Please delete as appropriate.	Electronic / Paper
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I declare that I am medically fit to take part in triathlon and associated events. I also agree to abide by the Articles of Association and decisions of the Management Committee.

Signature: _____ Date: _____

Signature of parent/guardian (15-17 year-olds): _____

(Emailing the form is acceptable as a signature)