



## SENIOR MEMBERSHIP REGISTRATION FORM 2018 - 2019

<b>First Name</b>		<b>Last Name</b>	
<b>Address</b>			
<b>Email</b>		<b>Post Code</b>	
<b>Mobile Phone</b>		<b>Date of Birth</b>	
<b>Occupation</b>			
<b>Ethnicity</b>	<small>(eg White, Black African, Black Caribbean, Black-other, Indian, Pakistani, Bangladeshi, Chinese, Asian, Other).</small>		
<b>What skills do you have that could help develop SHC?</b>	<small>(eg web design, fund raising, accounting, printing, planning, sponsorship etc)</small>		

<b>Select Subscription: all subscriptions to be paid by 31<sup>st</sup> October</b> <small>(indicate by underlining appropriate subscription)</small>	<b>Direct Debt</b>	<b>Cheque</b>	<b>Cash</b>
<b>Playing</b>	<b>£135.00</b>		
<b>Student</b> <small>Current university students or returning Colts (first year only)</small>	<b>£70.00</b>		
<b>Social</b>	<b>£5.00</b>		

<b>MEDICAL INFORMATION</b>	
<b>Any Medical Conditions</b>	
<b>Emergency Contact Name</b>	
<b>Emergency Contact Number</b>	
<b>Disability</b>	<small>None, deaf, visually impaired, physical disability, learning disability, multiple disability</small>

<b>DECLARATION</b>
<i>I consider myself to be physically fit and capable of participating fully. I agree to notify SLHC of any changes to the medical information provided. In the event that I am injured I give my permission for the team managers/coaches appointed by SLHC to obtain emergency medical treatment on my behalf.</i>
<i>I agree that South Lakes Hockey Club can store my contact details on this form in a database and may contact me using the details supplied for the purpose of managing my membership and providing membership services. Medical details will be held securely with restricted access to authorised Club officers only.</i>
<i>I agree to abide by the SLHC's Codes of Conduct for behaviour and discipline. These are displayed on the Club's website.</i>
<i>I agree that photos taken of games/events in which I am shown may appear on the SLHC website, or be used for promotional purposes for the Club. Place an "x" by clicking in here <input type="checkbox"/> to signify agreement.</i>
<b>Member's Signature</b>
<b>Date</b>

**When you are happy that your membership details are correct you can; hand these to Cat Cooke or Gayle Mawdsley, email to [gayle\\_m@hotmail.co.uk](mailto:gayle_m@hotmail.co.uk) or post it to:**

**86 Rusland Crescent  
Ulverston  
Cumbria  
LA12 9LZ**

**Payment Options**

1. Pay in full by cash, cheque or in to the Club bank account
2. Pay in instalments by cash, cheque or standing order  
*(if paying in instalments this must be paid by the start of March at the latest)*

Name:..... Date:.....

*Please indicate which payment option you have chosen and hand to Cat Cooke.*

If you would like to discuss the fees, please contact Cat Cooke (Club Treasurer)