

Kingston upon Hull Athletic Club

Membership Application Form

“Kingston upon Hull Athletic Club is a club for all, irrespective of age, gender, disability, race, ethnicity, religion or political view.”

First name(s)		Ethnic Origin (Please Circle)	Bangladeshi Black(African) Black(Caribbean)
Surname			Black(UK) Chinese Indian Pakistani
Address			White(European) White(Non-European)
			White(UK) Other Not Declared
<u>In Case of Emergency (I.C.E)</u>			
Post code		Next of Kin	
Home Tel		Emergency Tel	
Mobile		Relevant Medical Information (Please Circle)	None Known Asthma
Email			Diabetes Epilepsy Haemophilia
Date of Birth			Allergies (specify).....
Gender	Male / Female		Other (specify).....

IF YOU USE AN **INHALER** YOU NEED TO **REGISTER**, PLEASE ASK YOUR COACH OR CLUB SECRETARY FOR A FORM AT ONCE DON'T WAIT TO BE CAUGHT OUT AS THEY MAY CONTAIN **BANNED SUBSTANCES**

DO YOU HAVE ANY MEDICAL CONDITION WHICH THE CLUB OR YOUR COACH NEEDS TO BE INFORMED ABOUT.

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 If “yes”, what is the nature of your disability?

Visual impairment	<input type="checkbox"/>	Hearing impairment	<input type="checkbox"/>
Physical disability	<input type="checkbox"/>	Learning disability	<input type="checkbox"/>
Multiple disabilities	<input type="checkbox"/>	Other (please specify)	_____

SUBSCRIPTION RATES 2013-14

SENIORS £40.00 UNDER 20 £35.00

UNDER 13-17 inclusive £30.00 UNDER 11 £20.00 (as at 31/08/14)

ASSOCIATE £9.00

NEW MEMBERS JOINING IN OCTOBER or NOVEMBER PAY HALF RATE WITH DECEMBER AT FULL RATE AND CARRIED OVER TO NEXT YEAR.

ALL SUBS DUE ON 1ST JAN EACH YEAR.

Membership of other clubs.

Are you or have you been a member of another Athletics Club? YES / NO. If “yes”, please give details;

Club		Membership No.	
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Are you applying to KuH for 1st or 2nd claim membership? 1st Claim / 2nd Claim

Have you resigned from your previous club membership? YES / NO

If “Yes”, please give date of resignation _____

Are you applying for Higher Competition club membership? YES / NO

(i.e. Competing for KuH if your 1st Claim club enters competitions at a lower level)

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Competition Details (Please use an ‘X’ for all that applies)

Track and Field

Sprints
Middle Distance
Long Distance (3km+)
Throws
Jumps
Hurdles

Endurance

Cross Country
Road Running
Fell / Hill Racing
Race Walking

Have you represented your County YES / No County Name;.....

Volunteers (Coaching staff, Technical Officials, Club Admin, Events Support, Medical Personnel, etc)

Are you a qualified Coach? YES / NO If “yes”, please give details,

Level		Coaching Ref. No.	
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Are you a graded Technical Official? YES / NO If “yes”, please give details,

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Are you willing to volunteer in any way to help the club? YES / NO If “Yes”, please circle or give details, Examples of areas where the club requires assistance include;-

Accounting/Admin/Buildings/Catering/Coaching/Events Support/First Aid/I.T Skills/Legal/Logistics Maintenance/Media/Medical/Newsletter Publication/Reprographics/School Contacts/Teaching/Technical Officials/Tradesmen/Transport.

Any Other Services you could offer _____

IF ANY OF THE ABOVE DETAILS CHANGE, PLEASE NOTIFY THE MEMBERSHIP SECRETARY IMMEDIATELY, Membership of any other Athletic Club(s) if applicable

Name of Club(s).....Date joining/resigning.....Status(ie) 1st/2nd claim

Application to join/renew membership of Kingston upon Hull AC

I hereby apply for full membership and I understand my obligations under **UKA rules**. I agree to abide by the **Rules and Constitution of the Club**.

Kingston upon Hull AC will make every effort to provide a safe environment for members to both train and compete in, but cannot be held responsible for any accident/injury or loss of property.

I accept the above conditionssignature (parent/guardian if under 18)

Photos may be taken of you while training/competing and may be used for promotional purposes, if you object please indicate by ticking box

For club use only. Membership: Accepted/Not Accepted NoEAA Number Date of Election Date of resignation
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COMPLETED FORMS WITH CORRECT MONEY (cheques payable to Kingston upon Hull AC) TO BE FORWARDED TO:
Mrs J Wilson, 1 Well Lane, Willerby, East Yorkshire, HU10 6EP.

Data provided will be protected by the Data Protection Act and stored on computer, for administration purposes only. If you object please inform the Membership Secretary of your concerns.