**LOUTH ATHLETIC CLUB MEMBERSHIP FORM**

**2nd CLAIM MEMBERS**

**Season 2017/18**

**SURNAME…………………………………………………MR/MRS/MISS/MS(please circle)**

**FIRST NAMES(S)………………………………………………………………………………...**

**ADDRESS……………………………….………………………………………………………...**

**…..……………………………………………………POSTCODE……………………………..**

**TEL.NO…………………………….EMERGENCY CONTACT NO…………….…………...**

**EMAIL…………………………………..……….………….DATE OF BIRTH………………**

**ENGLAND ATHLETIC NO…………………………………………………………………….**

**MEDICAL INFORMATION e.g. asthma, epilepsy……………………………………………**

**ANY OTHER INFO TO BE AWARE OF……………………………………………………...**

I wish to apply for membership of Louth Athletic Club as a 2nd claim member. I hereby agree to abide by the rules of the club and Amateur Athletic Association.

I declare that I am an existing member of ………………………………………………………………..

I confirm that this club hold my first claim registration, which is governed by England Athletics, and that the club shall not be liable for accident, injury, loss or damage as a consequence of my membership in Louth Athletic Club. I also declare that I am medically fit to take part in athletics.

**SIGNED………………………………………………DATE………………………...**

 **SUBSCRIPTIONS**

 **Senior Members (20yrs +) £14**

 **Family of 3 Members £38**

 **200 Club annual membership = £24**

ALL CHEQUES TO BE MADE PAYABLE TO LOUTH ATHLETIC CLUB

NO SUBSCRIPTIONS WILL BE PROCESSED WITHOUT AN UP TO DATE MEMBERSHIP FORM

\*\*\*\*\*\*\*\*\*\*\*\* Club vests are for sale in all sizes for £20 each .\*\*\*\*\*\*\*\*\*\*\*\*

MEMBERSHIP SECRETARY:

Gordon Reid, Goulceby Post, Ford Way, Goulceby, Louth, Lincs LN11 9WD

Tel: 01507 343230 email: goulcebypost@hotmail.com

*\*\*Please be aware that photographs may be taken at events and that this is outside the control of Louth Athletic Club.\*\**