



## Adult Membership Application Form

We are very pleased to welcome you to the *Axwell Park & Derwent Valley Angling Association*

Please fill out this form and return to Alan Dodd the Club Treasurer. Email [alanatthegill@yahoo.co.uk](mailto:alanatthegill@yahoo.co.uk) or post to 63 Sherburn Park Drive, Rowlands Gill, Tyne & Wear NE39 1QY

**If you are under 16 years of age, please ensure you complete the junior membership form.**

Name

Address

Postcode

Home telephone number

Mobile\*

Email\*

Date of Birth

### Disability

The Disability Discrimination Act 1995 defines a disabled person as anyone with 'a physical or mental impairment, which has a substantial 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?** \_\_\_\_\_

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Please state the type of membership you are applying for:

- |   |        |                          |
|---|--------|--------------------------|
| Full Member                                 | £78.00 | <input type="checkbox"/> |
| Retired Member (over 65yrs)                 | £63.00 | <input type="checkbox"/> |
| Junior Member (12 to 16 yrs)                | £20.00 | <input type="checkbox"/> |
| Intermediate Member (16 to 18 yrs)          | £42.00 | <input type="checkbox"/> |
| Junior Member (under 12 with parent member) | Free   | <input type="checkbox"/> |
| Coarse Member (limited access)              | £10.00 | <input type="checkbox"/> |
| Cheque Enclosed                             |        | <input type="checkbox"/> |

Experience to date:

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Briefly what are you looking for in an angling club: \_\_\_\_\_

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State membership of past and present clubs: \_\_\_\_\_

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State any additional information you may wish to give to support this application:

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If accepted I agree to abide by the rules of the association

Signature \_\_\_\_\_ Date \_\_\_\_\_





## Axwell Park and Derwent Valley Angling Association

### Junior Membership Application Form

We are very pleased to welcome you to the *Axwell Park & Derwent Valley Angling Association*

Please fill out this form and return to Alan Dodd the Club Treasurer. Email [alanatthegill@yahoo.co.uk](mailto:alanatthegill@yahoo.co.uk) or post to 63 Sherburn Park Drive, Rowlands Gill, Tyne & Wear NE39 1QY

If you are under 16, please also ask your parent or carer to sign the form before it is returned. We will also use this information to ensure that you are kept informed about club events.

**Name**

**Address**

**Postcode**

**Home telephone number**

**Mobile\***

**Email\***

**Date of Birth**

\* Neither the mobile number nor the email should be that of the child – For a child/young person these details should be those of the parent/carers.

#### **Disability**

The Disability Discrimination Act 1995 defines a disabled person as anyone with 'a physical or mental impairment, which has a substantial 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?**

### Medical information

Please detail below any important medical information that our club coaches should be aware of (e.g. epilepsy, asthma, diabetes etc.)

### Emergency contact details

To be completed by the parent/carer

Please insert the information below to indicate the person(s) who should be contacted in event of an incident/accident.

**Contact name e.g. parent/carer**

**Emergency contact number**

By returning this completed form, I agree to my son/daughter/child in my care taking part in the activities of the club.

I understand that I will be kept informed of these activities – for example timing and transport details.

I understand in the event of injury or illness all reasonable steps will be taken to contact me, and to deal with that injury/illness appropriately.

**Name of parent/carer:**

**Signature of parent/carer:**

**Date**

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