



## Peak Paddlers Canoe Club Membership Form

First Name	Date of Birth      /      /								
Last Name	Male                                  Female								
Address	Type of Membership:								
Postcode	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Adult (18 and over)</td> <td style="padding: 2px; text-align: right;">£25.00</td> </tr> <tr> <td style="padding: 2px;">For Family Members only (Parents + children between 8 &amp; 17)</td> <td style="padding: 2px; text-align: right;">£25.00 for 1<sup>st</sup> adult then £10 per person</td> </tr> <tr> <td style="padding: 2px;">Yearly Paddling fee</td> <td style="padding: 2px; text-align: right;">£15 per year</td> </tr> <tr> <td style="padding: 2px;">Kit Hire, e.g. boat, cag.....</td> <td style="padding: 2px; text-align: right;">£1 per Item</td> </tr> </table>	Adult (18 and over)	£25.00	For Family Members only (Parents + children between 8 & 17)	£25.00 for 1 <sup>st</sup> adult then £10 per person	Yearly Paddling fee	£15 per year	Kit Hire, e.g. boat, cag.....	£1 per Item
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If family membership is being requested please complete the following information

	First Name	Last Name	Adult/ Junior	Male / Female	Date of Birth	Confirm they can Swim 50m
Member 2						YES
Member 3						YES
Member 4						YES
Member 5						YES

<b>Email:</b>	<b>Phone number:</b>
Are you a BCU member Yes No	Do you hold any BCU coaching qualifications?  Yes No

Application for membership.

Upon acceptance into membership of the Peak Paddlers Canoe Club I understand that canoeing is undertaken at my own risk. I confirm that I do not suffer from any disability or medical condition which may render me, or anyone else applying for membership, unfit for strenuous exercise.\*\*

*I confirm I have read the club Safety Policy and the Child Protection Policy (both available on PP website). (Parents/Guardians only) I confirm that I have read the photography policy (available on PP website) and agree to inform the Club if my child is the subject of any Court Order preventing photographic images being taken.*

I am able to swim 50 metres in light clothing                  Yes /No

**I apply for membership of PPCC. Signed \_\_\_\_\_**

\*\* Should a medical condition exist this will not necessarily preclude you from membership / participation, but it must be declared. Should you be in any doubt, advice should be sought from your family doctor.

**Please make all cheques payable to “Peak Paddlers Canoe Club”** Peak Paddlers Canoe Club keeps all membership records on computer, no information is shared with any other organisation other than the British Canoe Union for the purposes of affiliation.

**For Club use only**

Date application received

Fee Paid

Cash / Cheque

Date Banked

Please also complete this Emergency Contact Form so that should an incident occur whilst you are paddling then the Club will be able to contact someone for you.



### Emergency Form

Your Name:	
Date of Birth:	
Next of Kin:	
Address:	
Telephone No.:	
Mobile No.:	
Relationship to Participant:	
Alternative Contact Name:	
Telephone No.:	
Mobile No.:	
Relationship to Participant:	
Please state medical condition and/or medication:	
Signed (if under 18 Parent/Guardian)	
Date	

This Form is used in case of an emergency. You should complete this with the details of someone that we can call should an accident occur.

Details of relevant medical conditions will be made available to coaches/safety officers/first aiders if needed, otherwise any condition will be held in confidence.