



Southampton Coalporters ARC
 Northam Bridge, Southampton
 Hants, SO14 0QE
 02380 636 521

Southampton Coalporters ARC Application for Membership

Personal Details					
Surname				Forename	
Title		Sex		Date of Birth	
Address					
Postcode					
Telephone	Landline		Mobile		
Email					
Occupation	(if Student please enter course of study)				
Emergency Contact Details					
Name				Relationship	
Address					
Postcode					
Telephone	Landline		Mobile		
Capability and Qualifications					

I am a member of British Rowing Membership Number:

I confirm that I am free to row for Southampton Coalporters ARC from any previous rowing club

I can swim 50 metres (MANDATORY)

I can swim 100 metres in light clothing

I have passed a capsized/swim drill

I hold a trailer licence

I hold a Power Boat Level 2 Licence

I can help in the club bar

I hold the following qualifications:

		Qualification	Expires
Life Saving Qualification	<input type="checkbox"/>		
First Aid	<input type="checkbox"/>		
Coaching	<input type="checkbox"/>		

Please tell us about any other useful skills that you are able to bring to the club
 (e.g. Carpentry, Plumbing, Electrical, Marketing, Computer Skills ...):



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Membership Category Required

- Existing Life/Honorary Member
- Adult Rower
- Retired/Unemployed Rower
- Junior 18 Rower
- Solent University Rower
- Student (non-Solent) Rower
- Coach
- Coxswain
- Occasional Gym
- Social Only

Please see the notice board for current membership fees.

If there are any questions regarding membership or payment please contact the membership secretary.

Keys

I hold a club key Club key Number

Payment Method

Payment Due:	£	<input type="text"/>
Payment Method <i>(Cheque/Bank Transfer preferred)</i>	Cash	<input type="checkbox"/>
	Cheque	<input type="checkbox"/> <i>(Please give to membership secretary. Cheques to be made payable to "Southampton Coalporters ARC")</i>
	Bank transfer	<input type="checkbox"/> <i>Southampton Coalporters ARC, Lloyds Bank Hedge End Account Number : 00009166 Sort Code : 30-13-95 Please Use Reference : MEMBERSHIP (Please let the membership secretary know when complete)</i>

Health Declaration

Please tell us about any medical conditions or disabilities that could affect you whilst exercising (e.g. Diabetes, Asthma, Blood Pressure and Heart problems ...):

Note - Should a medical condition or disability 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)

Signature

Upon acceptance to the rowing club I understand that rowing and land training is undertaken at my own risk and I confirm that I do not suffer any disabilities or medical conditions that may render me unfit for strenuous exercise. I am aware that it is strongly advised that I do not use the club facilities if I am alone and that if I do so it is entirely at my own risk. I understand that photographs may be taken during club events and I consent to the club using photographs that include myself in club publicity.

Signature Date

Print Name

Parent /Guardian Signature If Under 18