

## Membership Form 2010

Membership Category	Amount	Choose one
Senior (over 16 years) With EA Affiliation Race Licence	£20-00	
Senior (over 16 years) Without Race Licence	£15-00	
Social (Non-running)	£5-00	
Junior (Under 16 years)	£2-00	

(Block Capitals Please)

(First Name)  (Surname)

Address

Postcode

Gender Male  Female  Date of Birth

Telephone Home  Mobile

E Mail Address

Are you a member of another running club? Yes  No

If yes which club.

I hereby agree to abide by the rules of both the BRJ Road Runners & all regulatory authorities.

Signed  Date

Print name

Please return the completed entry form and cash/cheque (made payable to BRJ Running Club) to:

**Gillian Peck, BRJ Membership Secretary,**

**Phone 07919 264263**

## Medical and Emergency contact information

### MEDICAL INFORMATION

We are required by the UKA insurers to hold on our emergency file details of any known condition which might affect your ability to train/compete, or which may be triggered by such activity (e.g., epilepsy, asthma, diabetes, heart conditions etc), and details of any long-term medications used. This information will not be disclosed to anyone, other than (a) your membership secretary who needs to be aware, or (b) to a Para-medical during emergency treatment. Please give brief details below. If none please state none.

### Medical information

### Emergency contact details

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

Contact name.

Emergency contact numbers  

Home No	Mobile No
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### Ethnicity (please tick as appropriate)

White	English	<input type="checkbox"/>	Scottish	<input type="checkbox"/>	Welsh	<input type="checkbox"/>	Irish	<input type="checkbox"/>	Other	<input type="checkbox"/>
Mixed	White & Black Caribbean	<input type="checkbox"/>	White & Black African	<input type="checkbox"/>	White & Asian	<input type="checkbox"/>		<input type="checkbox"/>	Other	<input type="checkbox"/>
Asian	Indian	<input type="checkbox"/>	Pakistani	<input type="checkbox"/>	Bangladesh	<input type="checkbox"/>		<input type="checkbox"/>	Other	<input type="checkbox"/>
Black	Caribbean	<input type="checkbox"/>	African	<input type="checkbox"/>				<input type="checkbox"/>	Other	<input type="checkbox"/>
Chinese	Chinese	<input type="checkbox"/>						<input type="checkbox"/>	Prefer not to state	<input type="checkbox"/>

Signed

Athlete, Parent/Guardian (delete as appropriate)

Please tick this box if you do not wish information and pictures relating to your club activities to be included on our website.