

## MEMBERSHIP FORM

Title				
First Name		Surname		
Address				
		Post Code		
Telephone		Mobile		
Date Of Birth		Email		
Nationality				
,	honol			
Emergency Confider (Name & Telep				
Hyde Park Harriers is affiliated to the like to be indicated as your main ev				
	•			
Road Running	Cross Country	Fell	Race Walking	
As a member you will confirm that you w	rill abide by all UKA rules v	with regards to competition.		
Membership Type (please tick	all relevant box	es):		
New (Includes Club Vest)	Renewal	Senior	Junior (+14)	
First claim membership				
First claim membership I confirm that I am not first claim	member of any other r	unning club in the above dis	ciplines	
Second claim membership	am a first claim mamb	or of		
Second claim membership - I of My UKA registration number is	am a ilisi cialm memb	er or		
Medical Information:				
Please detail below any important medic	cal information that the cl	lub should be aware of (e.a. e	epilepsy, asthma, diabetes.	
allergies etc.) <b>Do not leave blank</b> – if th			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Declaration:				
Please tick the following boxes and s	sign below to confirm t	that you agree to the follo	wing statements and	
conditions of membership. Your per according to the General Data Pro			and processed	
I am happy for photographs of club events in which I feature to be used on the club website and social networking sites.		I agree to my membership details to be kept electronically		
		by the club committee. I consent to receiving communications by email, telephone and post.		
Junior Membership (Junior Me	embers must obto	ain consent from no	erent or auardian)	
Signed		Date	,	
Parent or Guardian		Date	Date	
Saniar Mambarshin				
Senior Membership Signed		Date		
Please give this form and the appropriate post to: 66 Musgrave View, Bramley, Leed If you wish to pay by bank transfer our de Please quote your name and 'MEMBERSH	ds, LS13 2QN. tails are: HSBC, sort code	is 40-27-15, Account no. 0403	9289.	
Club Admin:				
UKA Number	Date Of Registration	Pay	yment Method	
Date Paid In	Vest Issued			