



# 2012 Membership Application Form Senior

Please complete in CAPITALS			
Name:			
Address:		Male/Female:	
		Date of birth:	
		First claim club:	
Postcode:		Second claim club:	
Home Tel No:		Email:	
Mobile No:		Ethnic Group:	

**FOR OUR RECORDS IT WOULD BE HELPFUL IF YOU COULD GIVE DETAILS OF ANY PERFORMANCE TIMES YOU MAY HAVE IN ANY TYPE OF EVENT.**

<u>DISTANCE</u>	<u>PERSONAL BEST TIME</u>	<u>YEAR AND COURSE</u>
10 MILES		
25 MILES		
50 MILES		
100 MILES		
BEST ROAD RACE TIMES		
ANY OTHER TYPE OF EVENT		
WHAT TYPE OF CYCLING ARE YOU INTERESTED IN--		

**Cyclists Medical / disability / any other information:** Please detail any important information the club should be aware of (e.g. epilepsy, asthma, diabetes, allergies, A.D.H.D., hearing or visual impairment, physical or learning disability, etc) or any other information... Or if you have a medical condition, the recommended treatment/actions to be taken if symptoms appear. Or detail on a separate sheet.

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Signed \_\_\_\_\_ Date: \_\_\_\_\_

Membership Status required \_\_\_\_\_ Annual Membership Fee Total: £ \_\_\_\_\_

<b>Membership Fees:</b>	SENIORS	£20	SECOND CLAIM MEMBERS	£12
	OVER 60 YEARS OF AGE	£10	SOCIAL MEMBER	£5
	FAMILY	£35 (2 adults plus children) <i>Please use family membership form</i>		

**Once you have completed the form it must be sent or given ONLY to the Club Secretary named below:**

**Please make your cheque payable to "Thanet RC".**

**Thanet RC. Secretary, Gill Griffith, 35, King Edward Avenue, Broadstairs, Kent CT10 1PH**

**If you have any queries please contact Tel: 07415813456**