



## MEMBERSHIP FORM

[www.sheffieldcanoeclub.co.uk](http://www.sheffieldcanoeclub.co.uk)

Please complete this form in **BLOCK CAPITALS** and return with the correct fee to the Membership Secretary or a committee member. *(If you require any more information relating to membership categories please contact the membership secretary).*

<b>Membership categories &amp; Renewal Fees (tick box as appropriate)</b>		√
<b>Full Members</b> ( <i>18yrs and over</i> ).	£30.00	
<b>Families, couples and their children</b> ( <i>under 18yrs</i> )	£40.00	
<b>Youth</b> ( <i>under 18yrs</i> ). Includes membership for one non-paddling parent/carer.	£15.00	
<b>Concessionary</b>		
<ul style="list-style-type: none"> <li>• Full-time student</li> <li>• OAP's</li> <li>• Unemployed (proof required)</li> <li>• Non -paddlers</li> </ul>	£15.00	
<b>Affiliated group</b>		
<ul style="list-style-type: none"> <li>• Name of Group: .....</li> <li>• Name of full canoe member responsible for group: .....</li> </ul>	£50.00	
<b>Affiliated District Scouts</b>		
<ul style="list-style-type: none"> <li>• Name of Group: .....</li> <li>• Name of full canoe member responsible for group .....</li> </ul>	£100.00	

### MEMBERS DETAILS

**Surname** ..... **First Name** ..... **DOB** (*under 18's*) .....

**Address** .....

**Postcode** ..... **Telephone Number** .....

**Email address** .....

**BCU Number** .....

In accordance with General Data Protection Regulations (GDPR) this information is held on the Sheffield Canoe Club database and will not be disclosed to third parties.

### Family / Couples

Name of each family member (please bracket non-paddling members)

1. ....	<i>DOB if under 18yrs</i>
2. ....	.....
3. ....	.....
4. ....	.....
5. ....	.....

**Photographs and recordings are often taken for publicity purposes.**  
**Please inform the event co-ordinator/coach/leader if you do not wish to be included in photographs.**

I enclose payment of £..... (*cheques payable to Sheffield Canoe Club*)

Payment received by:.....

**Please read Sheffield Canoe club constitution before signing and returning this form.**

**Signature** ..... **Date** .....

This form should be signed by the parent /carer if under 18yrs. Affiliated membership to be signed by the full member named above.

### Membership Receipt

**Name:** .....

Cash/Cheque received on: .....

<b>Full</b>	
<b>Family/Couples</b>	
<b>Youth</b>	
<b>Affiliated</b>	

Payment received by: .....		
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