



Tri Team Wessex

Membership form



MEMBER Information

Name:		Date of birth:
Home phone:		Mobile phone:
Address:		
Town/city:	County:	Postcode:
Gender: Male / Female	Email address:	

EMERGENCY CONTACT INFORMATION

Emergency contact name:
Emergency contact number(s):
Relationship to member (e.g. husband, friend, mother) :

British triathlon federation (if applicable)

Membership Number:

health questionnaire

Tri Team Wessex wants to ensure your health and safety. To make sure that you are fit enough to take part in triathlon training the following questionnaire must be completed. Please use your common sense when answering. If you answer YES to any of the questions or DON'T KNOW, you must make sure that your doctor confirms that it is safe for you to train.

Delete as appropriate

Do you know of any other reason why you should not exercise or increase your physical activity?	Yes / No / Don't Know
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If YES or DON'T KNOW please comment:

Membership type & payment information

Tri Team Wessex membership and training pricing				Bank transfer information: Tri Team Wessex Bank: Lloyds Bank Account number: 59668060 Sort code: 30-99-71 *IMPORTANT * Please ensure that you include your name and the word 'Membership' as the reference when making your payment.
Membership type	Annual Fee	Training fee	PAYG	
Junior	£ 20.00	£ 18.00	£ 5.00	
Student	£ 25.00	£ 20.00	£ 6.00	
Adult	£ 30.00	£ 25.00	£ 7.00	
Adult + 1 Junior	£ 40.00	£ 30.00	£ 9.00	
Couple	£ 45.00	£ 38.00	£ 10.00	
Family	£ 50.00	£ 45.00	£ 15.00	

PLEASE TURN OVER

important information – please read

To sign an electronic version of this form please delete as appropriate the Yes or No that is printed next to 'Please accept the typed name below as my eSignature' in the declaration boxes below and then type your name. Alternatively, you can print it off, sign and scan a copy. Please remember to add the date.

Please ensure that **all** sections have been completed.

Membership declarations & signatures

I have read, understood and completed the above questionnaire honestly and to the best of my knowledge. I confirm that I am voluntarily engaging in an acceptable level of exercise and that my participation involves a risk of injury. I accept that activities with Tri Team Wessex are at my own risk. If my health changes at any time, I understand that it is my responsibility to cease or modify my training and consult my doctor as to whether it is safe for me to continue training. I must also accordingly advise relevant club officials and members.

I agree to abide by the club rules, code of conduct and regulations; I understand and agree that I participate in any club session at my own risk and that no responsibility whatsoever shall attach to any person involved in the organisation of such session for any injury, accidents, loss or damage suffered by me in or by reason of the session, however such may be caused.

Member signature: Please accept the typed name below as my eSignature – Yes/No	Date:
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Parent/guardian signature(<i>if under 18</i>): Please accept the typed name below as my eSignature – Yes/No	Date:
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I agree to the details on this Membership form being stored and viewed by Tri Team Wessex Committee and session coaches. I understand my data will not be shared with any third party without my express agreement. Data will be stored until 3 months after your membership with the club ceases. I understand I have the right to complain to the Information Commissioner's Office if I think there is a problem with the way Tri Team Wessex are handling my data.

Member signature: Please accept the typed name below as my eSignature – Yes/No	Date:
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Parent/guardian signature(<i>if under 18</i>): Please accept the typed name below as my eSignature – Yes/No	Date:
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I agree to my image being used for promotional purposes including but not limited to use on social media, in newsletters and on the Tri Team Wessex website.

Member signature: Please accept the typed name below as my eSignature – Yes/No	Date:
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Parent/guardian signature(<i>if under 18</i>): Please accept the typed name below as my eSignature – Yes/No	Date:
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