



## MEMBERSHIP FORM

[www.sheffieldcanoecub.co.uk](http://www.sheffieldcanoecub.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> (18yrs and over).	£30.00	
<b>Families, couples and their children</b> (under 18yrs)	£40.00	
<b>Youth</b> (under 18yrs). 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 .....

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.

<b>Family / Couples</b>	<i>DOB if under 18yrs</i>
Name of each family member (please bracket non-paddling members)	
1. ....	.....
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.

<b>Membership Receipt</b>			
	<b>Name:</b> .....	<b>Full</b>	
	Cash/Cheque received on: .....	<b>Family/Couples</b>	
	Payment received by: .....	<b>Youth</b>	
	<b>Affiliated</b>		