



# SOUTH CHESHIRE HARRIERS

## MEMBERSHIP APPLICATION FORM

<b>First Name</b>		<b>Other Initials</b>	
<b>Surname</b>		<b>Gender</b>	<b>M or F</b>
<b>Address 1</b>		<b>Date of Birth</b>	
<b>Address 2</b>		<b>Place of Birth</b>	
<b>Town</b>			
<b>County</b>			
<b>Postcode</b>			

<b>Home Phone</b>		<b>Mobile Phone</b>	
<b>Work Phone</b>		<b>Fax</b>	
<b>Email</b>			

<b>Other Clubs of which You are a Member</b>		<b>First / Second Claim</b>		<b>Date of Resignation from Previous Club</b>	
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I confirm that I am eligible to compete under UK Athletics Rule. I \*accept / \*do not accept that my personal data will be held on a computer by the club. I \*agree / \*do not agree to the disclosure of my personal data in a list of members and to the North of England AA. (\*Delete as applicable)

**Signed:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Parent/Guardian:** \_\_\_\_\_  
(if under 18)