



Thurrock Harriers Membership Form

First Name Surname
 Address Home Telephone
 Mobile Number
 Postcode Date of Birth
 Email Address Male/Female
 Name of coach (if any).....

Are you a member of another club? YES/NO 1st or 2nd Claim Club Name

<p align="center">Annual Membership (Renewals Due 1st April) (For New Members joining after Oct 1st Membership & Season Tickets fees are half price)</p>		
U11, Junior & Full Time Student (Under 21)	£ 17.50	£
Associate/OAP (Non Competitors)	£ 12.00	
Senior (18 and over)	£ 29.00	
<p>NB. Without a Season Ticket, Track Fee is payable per session.</p>		Track Fees are listed on our website.
<p align="center">England Athletics Affiliation Fee Compulsory if you want to compete in either track, field, road or cross country. England Athletics will hold your information on their central database and issue you with a personal number. This athlete number will be required to enable you to compete. *Not applicable for athletes U11 or those who do not compete. Delete if not applicable.</p>		<p>£ 5.00 *</p> <p>This is paid directly to England Athletics</p> <p>E.A. Affiliation No.</p>
<p align="center">Season Ticket</p> <p>Members £60 Non Members £80 (Reduced to £45 for Members if paid before 30th April)</p>		£
<p>Please make Cheques payable to:- <u>Thurrock Harriers</u></p>		TOTAL £

Please return form with payment to:- [The Clubhouse Canteen](#)
 OR Post to :- [Membership Secretary, Chris Reed, 18 Flint Street, Grays, Essex, RM20 3HA](#)

Medical Information

Please detail any treatment/diagnosis for any illness/disability ie. Asthma, epilepsy, diabetes or heart condition etc, or have any concerns regarding health issues that the Club should be made aware of, on the reverse of this form. Particularly if any medication the athlete is taking contravenes any regulations, eg. asthma inhalers. All information will be treated as confidential.

Emergency Contact Details

Please insert the information below to indicate the person(s) who should be contacted in event of an incident/accident.
Contact name e.g. next of Kin :
Emergency contact numbers :

Declaration to be signed by applicant

I hereby apply to become a member of Thurrock Harriers and agree to comply with the rules of the club, UK Athletics and wear club colours. I acknowledge that the information I have given will be stored on a computer for club administration purposes only, to which I have no objection. I also have no objection to receiving emails from the Club regarding forthcoming events and other information.

Signature Date

Consent of parent/guardian if applicant is under 16 years of age

Name

Signature Date

FOR OFFICE USE ONLY

Payment Received : Cash or Cheque Membership Card No. /Issued On :
 Membership Secretary: Chris Reed Email: thurrockharriersmembership@gmail.com