

West Lothian CLARION

West Lothian Clarion Cycling Club
A Section of the National Clarion Cycling Club

Membership Application Form 2012

PLEASE COMPLETE ALL SECTIONS OF THE FORM

Name (include title, first & surname)	
Number & Street / Road	
District	
Town / City	
County	
Postcode	
Home Telephone Number	
Mobile Number	
E-mail address (please use lower case)	
Date of Birth	
Emergency Contact / Parental details	Name
	Telephone Number
Are you a member of another cycling club?	Yes / No (If Yes , answer next two lines)
Will you be a first claim member?	Yes / No (If No , see below)
Name of your first claim cycling club	
Membership type (tick one circle)	Senior £15 <input type="radio"/> Household £10.50 <input type="radio"/>
What do you want to get out of the club? (tick relevant circles)	Club runs <input type="radio"/> Social activities <input type="radio"/> Improve bike skills <input type="radio"/>
	Improve fitness <input type="radio"/> Meet similar people <input type="radio"/> Enter events/races <input type="radio"/>
West Lothian Clarion relies on volunteers to assist in club activities such as marshalling at events and leading rides. This is key to the success of the club. Can you help? <input type="radio"/> How can you help?	

I hereby declare:

- i) That the particulars submitted on this form are complete and correct.
- ii) I agree to abide by the constitution of the West Lothian Clarion (available on request or at www.westlothianclarion.co.uk) and the rules of the National Clarion Cycling Club (available on request or at www.clarioncc.org) during the course of my membership.
- iii) I understand that participating in club activities is **entirely at my own risk** and that no liability shall be attached to the West Lothian Clarion Cycling Club (including its officials and members) and the National Clarion Cycling Club (including its officials and members) for any injury, loss or damage suffered.

Signed:	Date:
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Your signature is required for your application to be processed.

Note: If a member is under 18 years of age, the declaration must be signed by parent or guardian who is also a member of the club

(OFFICIAL USE ONLY) DATE RECEIVED	DATE SENT TO NCCC	MEMBER NUMBER WLTH
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