



ANDOVER WHEELERS MEMBERSHIP APPLICATION

I wish to apply for **First/Second* claim** membership of Andover Wheelers and if admitted agree to abide by the Rules of the Club and to participate in its activities and events at my own risk. I also **agree/disagree*** to the following information being stored on the Club and BC's computer records for the sole purpose of club administration. In line with GDPR Compliance 2018 (* delete as appropriate)

Name: *Male/Female** _____ Dob _____

Address: _____

_____ Post Code _____

Tel No _____ Emergency Contact Name/No _____

Signed _____ Date _____

Parental Consent

(To be completed by the Parents/Guardian of applicants under the age of 18 years)

I consent to my **Son/Daughter/Ward*** becoming a member of Andover Wheelers and to **his/her*** taking part in its activities and events at **his/her*** own risk. I am satisfied that **he/she*** is sufficiently dependable to assume responsibility for **his/her*** own safety

Signed: *Parent/Guardian*Name (*Print*)..... Date.....

To comply with **GDPR Compliance 2018**, we also need your permission before we take any images of your **Son/Daughter/Ward** that may appear on our website or in the local press. **I consent/do not consent** to any cycling images of my **Son/Daughter/Ward** being taken and used on the Andover Wheelers website and/or the local press

Signed: *Parent/Guardian* Name *Print* Date

Subscriptions (2019)

Seniors: £12.50, Senior Citizens: £5, 2nd Claim: £12.50, Under 18 years: £5, Family Membership: £20

Additional Family Members

Name	Dob	Relationship to Member	Tel	Email

Please indicate below your chosen Payment method

Bank Transfer	Sort Code 30 98 97 Acc No 46643560 (Verification will take place)	
Cheque	Payable to Andover Wheelers	
Cash		
British Cycling Website	Incurring £1 extra charge	

Please send or email the fully completed form along with payment if applicable to

Barry Pointer, 20 Swallowfields, Andover, Hampshire. SP10 5PN
barrypointer1@gmail.com

It is in your own interest to take out 3rd Party Insuranc