

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: <i>Male/Female</i> *		Dob			
ess:					
ode Email					
	Eme	ergency ContactName	e/No		
d	Date				
nt to my Son/Daughter/W	ard* becoming		eelers and to his/h	ge of 18 years) er* taking part in its activities and eresponsibility for his/her* own	
Signed: Parent/GuardianName (Print)				Date	
n/Daughter/Ward that ma	/ appear on o		ss. I consent/do i	fore we take any images on to consent to any cycling images or local press	
: Parent/Guardian		Name Print		Date	
niors: £12.50, Senior C		Subscriptions (2019) 2nd Claim: £12.50, Und Additional Family Memb	er 18 years: £5	Family Membership: £20	
Name	Dob	Relationship to Member	Tel	Email	
<u>Ple</u>	ase indicate	<u>e below your chosen Pa</u>	<u>yment method</u>		
	Sort Code 30 98 97 Acc No 46643560 (Verification will take place)				
	Payable to Andover Wheelers				
	Incurring £1 extra charge				
Transfer Succession Su	Sort Code 3 Payable to A	Andover Wheelers	-		

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

Barry Pointer, 20 Swallowfields, Andover, Hampshire. SP10 5PN <u>barrypointer1 @gmail.com</u>

It is in your own interest to take out 3rd Party Insurance with the CTC or BCF