CHEFFIELD CITY

SHEFFIELD CITY KAYAK CLUB

o	be	completed	by	Membership	Secretary
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Membership No / Club Expiry year

MEMBER:	SHIP FORM		
o topacous o		New member	
WHERE EVERYONE MATTERS WWW.sheffieldo	itykayakclub.co.uk		
Please complete this form in BLOCK CAP	PITALS and return with the	correct fee to the Member	ship
Secretary or a Committee Member	(NB - Read notes on back E		
Membership Category applied for (See Men	nbership Category codes on b	ack of form):	
	auto for the numero of nublicity.	f.vov do not wish	
From time to time photographs are taken at club evo to be included in these, please tick this box:	ents for the purpose of publicity. I	i you do not wish	
Member Details			
Surname	First Name		(for BC stats)
Address inc Post Code		19-45 / 45+	British Canoeing (BC):
		Delete as applicable	
Telephone No	AlternativeTel No	(IMPORTANT for emer	gency eg Relative)
VERY IMPORTANT - E-mail address:			
Date of birth (if under 18 yrs)	BC membership type / number (if applicable):	
If you hold any BC (formerly BCU) qualifications or	awards, please list below (Also se	ee back of form): -	
FAMILY & Couples		hald Bloom and an addition	and a second second
Name (AND DATE OF BIRTH IF UNDER 18 YRS) of each fa	mily member and BCO qualifications	neid. Please put non-paddling mei	mbers in brackets.
1	BC: 2	U16/16-18/1	19-45/45+ BC:
3	_	U16/16-18/1	=
AFFILIATED GROUP			
Name of affilated group			
Name of full member responsible for group			
I enclose payment in the sum of £		ayable to Sheffield City Kayak (Club
Form of payment (delete as applicable): Cheque / C	ash Payment receive	ed by:	
IMPORTANT: Have you ever been refused, or been e	expelled from holding BC/BCU me	embership? YES	NO
If 'YES', please provide date and reason (u	se additional sheet if necessary)		
Prospective members or those renewing their meml participating in club activities or events.	pership must READ AND SIGN the	e indemnity on this form before	
Visitors seeking temporary membership are similarl	y required to sign an indemnity e	ach time they wish to participat	te.
I, the undersigned declare that I, and anyone else named			
1 understand that Canoeing and Kayaking a		Sports that may carry attendant	: RISK;
participants should be aware of and accep	t this risk, and be responsible for	their own action and involvem	ent;
2 confirm that any medical conditions which cou	ld affect safety in paddlesport are dec	clared and necessary detail	
is given in the space provided on the back of th	nis form;		
3 agree to abide by the constitution and poli	cies laid down by Sheffield City K	Kayak Club	
N.B. The person signing this form	n MUST be at least 18 years of age	2	
Signed:	Date:		
_			the land are not are
The information on this form is to be held on a database in	n strict confidence for Club records o	nly and will not be disclosed to an	y tnird parties



Membership Receipt

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Full	I
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Name:	
£	Received on:

£	Received on:
Payment Recei	ved by:





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C T E





Membership Categories

CATEGORY	DESCRIPTION	CODE
Full Member:	Individuals over 18 years	1
Families / Couples:	Couples, families and children	2
Concessionary:	3A Full time students (living or working away from the area for 6 months or longer)	3A
	2) OAP's	3B
	3) Unemployed (proof will be required)	3C
	4) Non paddling members	3D
Youth:	Individuals under 18 years (This also includes membership for a non-paddling parent or guar	4
Restricted:	Member entitled to take part in a MAXIMUM of 3 club sessions	5
Affiliated Group:	The canoe section of a registered organisation (Section leader must be a Full member)	6

Period of Membership

Membership runs from 1st October to 30th September (except for Affiliated Groups and Districts)

Membership Fees (NEW MEMBERS* ONLY) are reduced when joining after 1st April, see scale below.

Membership not renewed on or before the expiry date will be taken as lapsed (there are not days of grace due to terms of insurance)

* New Member status can only be claimed by a person who has not been a member during the pervious 2 years.

Membership Fees 2019/20

	Full	Family (2)	Add'n Family	Concession	Youth	Affiliated Grou	<u>ıp</u>
		(2 + U18's)	(if 18+ yrs)				
Prompt Renewal	32.00	39.00	4.00	22.00	20.00	50.00	(paid annually)
ı	VB: Disco	ounted prompt	renewal fees a	are only applica	ble until 30th Se	ntember expiry	date

	<u>Full</u>	Family (2)	Add'n Family	Concession	<u>Youth</u>	Affiliated Gro	<u>up</u>
October to March	42.00	49.00	4.00	32.00	30.00	50.00	(paid annually)
April	38.00	44.50	3.80	29.30	27.00		
May	32.00	37.75	3.50	24.80	22.50		
June	26.00	31.00	3.20	20.30	18.00		
July	20.00	24.25	2.90	15.80	13.50		
August	14.00	17.50	2.60	11.30	9.00		
September	8.00	10.75	2.30	6.80	4.50		

BC Affiliation Fee of £2.00

£2.00 per person over the age of 18 years at the commencement or renewal of membership is included in the above scale of fees. The BC Affiliation fee may be deducted for each BC member over the age of 18 years at the commencement or renewal of membership

Payment of Membership Fees

Please send your completed membership form enclosing a cheque made payable to Sheffield City Kayak Club to: - Steve Cheetham, 4 Anglesey Road, Dronfield, Derbyshire, S18 1UZ.

Alternatively, you can pass your membership form and payment (cheque or cash) to a Committee Member at any club activity or meeting See www.sheffieldcitykayakclub.co.uk for details.

Membership Cards

Membership cards will be distributed by e-mail as soon as the Membership Secretary receives your correctly completed membership form. If you do not have an e-mail address arrangements can be made for you to collect your membership card at a club meeting or activity. Members of Affiliated Groups can obtain membership cards from their leader who is a full member of Sheffied City Kayak Club.

- NOTES 1. For insurance purposes, members of Sheffield City Kayak Club and Affiliated Groups must be prepared to show their card (with alternative I/D) as proof of membership before taking part in any club activities or events.
 - 2. Youth/Junior membership will become valid on receipt of signed parent/guardian consent form
 - 3. Junior members must be accompanied by a parent or guardian with signed consent at all times

Coaching/First Aid Qualifications and Medical Declaration

Please enter expiry dates for all qualifications held and enter any relevant medical conditions (use spplementary sheet if necessary)

	Member Number						
	1	2	3	4	5		
BC Number							
BC Expiry							
Canoe Safety Test Expiry							
Coaching Qualifications							
Coaching Qual Expiry							
First Aid Expiry							
DBS Check Expiry							
Medical conditions that could affect safety in paddlesport							