

Name  
 Address 1  
 Address 2  
 Address 3  
 Post code

Dear South West Road Runner

## South West Road Runners Subscription Renewal 2017/18

Rates (includes England Athletics Affiliation where applicable) are as follows:

- 1 First Claim Seniors (18 years and older) ...£35 (£30 before 31.3.17)
- 2 Second Claim.....£16
- 3 Students (18 and over).....£31.50<sup>1</sup> (£26.50 before 31.3.17)
- 4 Juniors (15 -17).....£20
- 5 Juniors (8-14).....£8
- 6 Family<sup>2</sup>.....10% discount on total payable
- 7 Social & Non-running.....£2

1 On sight of a valid NUS card

2 Up to 2 adults and up to 3 juniors for whom the adults have caring responsibilities

**ALL MEMBERSHIPS RUN UNTIL 31 MARCH 2018.**

Please make cheques payable to **South West Road Runners**  
**Please return your form together with your cheque on a Wednesday evening or post to:**

**Pauline Warner, Le Barre, Fore Street, Winkleigh, EX19 8HQ**

Cash payments are welcome on Wednesdays, but not by post please.

Membership subscriptions for the club are now due. The membership and session fees for 2017/18 are listed in the grey box. The subscription for 2017/18 has increased by £1 solely to cover a £1 rise in the affiliation fee athletes pay to England Athletics. **Please note there is a discount of £5 for early payment if your membership renewal reaches me by 31 March 2017. If you don't wish to renew, please let me know** and then I won't chase you for outstanding payment.

The club is currently migrating all its membership information to a new system that will be embedded in our web site. This will enable you to purchase your subscriptions

on line next year. This has necessitated some minor changes to the renewal form. Please check your contact details and supply the additional information where relevant.

Your club depends on help and support from members – particularly for our races and our Wednesday training sessions. **We expect each member/parent to help out with something at least once during the year.** The table below lists the main activities that your club needs help with; please use it to indicate how you would like to volunteer (items asterisked require training which the club will fund).

1 <sup>st</sup> Chance 10K (January)	
Drogo 10 (November)	
Collection of Wednesday night club session fees	
Wednesday night group leader*	
Assisting on the track/coaching*	
Supervision of Juniors	
Helping at social events	
Serving on the Committee	
Maintenance of the SWRR web site	

**Please review your details on the form overleaf, update and complete them if necessary, and return the form to me with your payment. Don't forget - if your contact details change during the year, please let us know so you continue to receive information from the club. If you have any queries, then please contact me.**

Many thanks  
 Pauline Warner  
 Membership Secretary  
 South West Road Runners

pauline.warner@aol.com

# South West Road Runners

## Membership Renewal Form 2017/18

PLEASE PRINT IN BLOCK CAPITALS

Surname			Title
First name		M	F
Date of birth			
Address 1			
Address 2			
Address 3			
Post Code			
Landline number			
Work number			
Mobile number			
E-mail address			
Emergency contact	Name: Phone (land line) Phone (mobile)		

Are you a member of another running club? Yes  No   
 If yes, current Club name .....

Have you resigned from that club? Yes  No   
 2<sup>nd</sup> claim application  (name of 1<sup>st</sup> claim club) .....

Do you have any of the following qualifications?

First Aid	
Leader in Running Fitness	
Coaching Qualification	

**Declaration:** I agree to be bound by the constitution & rules of South West Road Runners

Signed..... (Athlete) Date .....

**I understand it is the runner's responsibility to ensure medical fitness to run and to have any appropriate medication (eg inhalers) with me.**

**For applicants who are aged under 18:**

I give my consent to this application and to be bound by the constitution & rules of the club.

Name of Responsible Parent/Carer (PLEASE PRINT).....

Signature of responsible parent /Carer .....Date .....

Contact details (if different from those above)

**I understand it is the parent/carer's responsibility to ensure medical fitness to run and to ensure the runner has any appropriate medication (eg inhalers) with them.**

**Data Protection:** This information will be kept both in paper form and on various computers for club purposes. It will also be passed to our sport's Governing Body England Athletics. It will not be given to any third parties, either within the sport or otherwise, for commercial purposes.

Membership Secretary use only: Amount paid:..... Cheque Cash Date Received.....EA Number.....