

# Sittingbourne Rugby Union Football Club

## ADULT MEMBERSHIP FORM 2018/2019

### PERSONAL DETAILS

Full Name: ..... Date of Birth: .....

Home Address:.....

Postcode:..... Home Tel: ..... Mobile Tel. ....

E-mail Address: ..... Occupation.....

Emergency Contact Name: ..... Tel:.....

Relationship to Member:.....

Medical Details: *Please give details of any condition, allergy or disability, of which we should be aware*

To help monitor club membership please tick one of the following boxes to identify your ethnic group:

White  / Mixed  / Asian  / Asian British  / Black  / Black British  / Chinese  / Other ethnic group  / Prefer Not to Say

### ANNUAL SUBSCRIPTIONS

*Please tick relevant box and return payment with this form to your Captain, Jon Stoneman-Merret or James Fassenfelt; please make cheques payable to "Sittingbourne Rugby Club"; to pay by bank transfer pay Sort Code: 09-01-55 Account: 70968607 with reference initial and surname (e.g. F Smith). Please tick the relevant box below)*

		Cash	Chq	BACS	SO
Annual Senior Playing Membership	£210.00				
Under 21 Playing Membership	£105.00				
Social Membership	£45.00				
Social Membership (over 60)	£37.00				

### VOLUNTEERS

Would you be willing to get involved with SRUFC by assisting the Club Committee? YES / NO

If YES, please state what voluntary role you would be interested in: .....

Would you be willing to assist with coaching the Youth Section? YES / NO

If YES, please state any previous experience: .....

### TERMS OF MEMBERSHIP

**DECLARATION:** I hereby apply for membership of Sittingbourne RUFC (A section of Gore Court Cricket Club) and agree to adhere to the Club's Rules, Policies & Codes of Conduct. I understand that I will be registered with the RFU to be eligible to play in first team league matches if selected. I understand that Officials, Players, Coaches Assistants & Referees must be fully paid up members to receive cover from the RFU Compulsory Insurance Policy (Death & Total Permanent Disability). The Club does not purchase cover for temporary disability or loss of earnings and it is recommended that members make their own arrangement for any such cover.

**GENERAL DATA PROTECTION REGISTER:** I understand the data in this form will only be made available to coaches and officers of the Club for the sole purpose of administering club events and affairs in accordance with the Club Privacy Policy Statement published on the Club website.

Signature:..... Date:.....