

# Somer Valley Cycling Club

Secretary: Iain Messider  
45 Witham Friary  
Frome  
Somerset  
BA11 5HF

## APPLICATION FOR MEMBERSHIP

(Please print clearly and pass the completed application with payment to a Club official or post it to the Secretary at the above address)

SURNAME.....

FORENAMES.....

ADDRESS.....

.....  
.....  
.....

POST CODE..... TEL No.....

DATE OF BIRTH.....

I hereby apply for +First claim/Second claim\* membership of the SOMER VALLEY CYCLING CLUB.

I declare that I will read the rules of the Club and I agree to abide by them.

\*Delete as appropriate

+For first claim applicants — I declare that I am not a first claim member of any other Cycling Club

SIGNED..... DATE.....

(\*Personal data will be held on computer for Somer Valley CC official purposes only)

MEMBERSHIP CATEGORY: SENIOR  @ £12.50 / YEAR. UNDER 18  @ £7.50 / YEAR

Enclosed is my annual subscription.

SECOND MEMBER OF FAMILY/HOUSEHOLD @ HALF PRICE

(Who is designated first member of family/household? Please give name.....)

Note — Family/household members will receive only one copy of any correspondence from Somer Valley CC

Are you a member of the CTC or British Cycling? YES/NO

Please tick the areas of cycling you are interested in:

Road Racing  Time Trialling  Mountain Biking

Touring/Audax  Leisure  Cyclo Cross

TO BE COMPLETED BY THE PARENT OR GUARDIAN OF APPLICANT IF UNDER 18 YEARS OLD

I, being the parent/guardian of ..... and having had a Club Official explain to me the activities of Somer Valley CC, hereby give my consent for the above named to take part in those activities at his/her own risk and without liability whatsoever on the part of Somer Valley CC in respect of injury, loss or damage suffered by him/her however caused whether by negligence or otherwise.

SIGNED..... DATE.....

WITNESS..... (Signature of Club Official)

OFFICIAL USE ONLY

DATE OF APPLICATION..... MEMBERSHIP No.....