



2009 Membership Application

Surname	Please specify any medical conditions the club should be aware of..
Forenames	
Male <input type="checkbox"/> Female <input type="checkbox"/>	
Date of Birth	Are you a member of any other Tri club?
Address	1 st Claim club name
	2 nd claim club name
Postcode	Are you a member of any other Sports club?
Phone: Home	1 st claim club name
Mobile	2 nd claim club name
Email	CLUB NEWSLETTER
Emergency Contact (Name and mob no.)	Will be sent by email – please state if you prefer a different address to one opposite
BTA license holder? Y <input type="checkbox"/> N <input type="checkbox"/>	PAYMENT
TYPE O F MEMBERSHIP:	Pay on-line : coming soon
Full * (£15.00) <input type="checkbox"/>	Cheque
Student/junior (7.50) <input type="checkbox"/>	payable to Craven Multisport. and send to Ian
Family (£25.00) <input type="checkbox"/>	Taylor, 7 Crosshills Rd, Cononley, BD20 8JZ

* hardship fund may be available

<http://cravenenergy.freeforums.org>