



NORTHERN ATHLETICS CLUB MEMBERSHIP FORM 2019-2020



PLEASE COMPLETE ALL DETAILS IN BLOCK CAPITALS & RETURN
WITH YOUR SUBSCRIPTION TO THE ADDRESS BELOW

SECTION A: ATHLETE DETAILS

First Name				Surname		
Address						
				Postcode		
Telephone				Mobile Number (If over 16 years of age)		
Date of Birth (DD/MM/YY)				Email Address (If over 16 years of age)		
Name of School/						
Is NAC your first claim club? (If not, please state your first claim club)						
School Year (if applicable)				Preferred Events		

SECTION B: PARENT/CARER DETAILS

If you are under 16 years of age, please ask your parent/carer to complete the following section.

First Name				Surname		
Address						
				Postcode		
Telephone				Mobile Number		
Email Address						

Please note all correspondence will be sent by email

MEMBERSHIP FEES (Age as at 31st August 2019)

Under 7s	£10.00	Seniors Under 17 and Up	£37.00*
Under 9s and Under 11s	£17.00	Social	£10.00*
Under 13s and Under 15s	£32.00*	Non competing helpers/committee members	Free
Under 17s and Up in Full Time Education	£32.00*		

*Includes £15 UKA registration fees

Payment can be made via bank transfer to I.O.M. Northern Athletics Club, Sort Code 20-26-74, Account Number 50524344
Reference: Members Name (**copy of confirmation to be attached to this form**)

SECTION C: PARENT/CARER HELP

We would like to ask all parents /carers to consider helping out at club events wherever possible. In particular, we need help at the track league on Wednesday evenings. Please tick areas you would be interested in helping with.

Helping at athletic meetings		Assisting Training	
Refreshments		Team Management	
Fundraising		Supervision of Athletes	
Helping Officials (track or field?)		Committee Post	
Website Management		Club Kit Helper	
First Aiders		Road Race Marshals	
Press / Publicity		Other (please specify)	

SECTION D: MEDICAL INFORMATION

Please detail below any important medical information that our coaches/junior coordinator should be aware of (e.g. epilepsy, asthma, diabetes, allergies etc.) **Please do not leave blank** – if there is no information please write 'None'.

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SECTION E: EMERGENCY CONTACT DETAILS

Please insert the information below to indicate the persons who should be contacted in event of an incident/accident.

Primary Emergency Contact Name:	
Tel/mobile number:	
Secondary Contact Name :	
Tel/mobile number:	

It may be essential at some time for authorised persons acting on behalf of the club to have the necessary authority to obtain urgent treatment which may be required whilst at representative club competition or training. Please sign below to give your consent to emergency treatment being given to the named athlete on this form by trained personnel.

Signature	
Print Name	

SECTION F: ATHLETE AGREEMENT

By returning this completed form, I am willing to abide by the club code of conduct for athletes and agree to always behave in the manner befitting an NAC Athlete, when attending club events.

Signature	
Print Name	

SECTION G: PARENTAL/CARER AGREEMENT

By returning this completed form, I agree:

1. To the named athlete taking part in the activities of the club.
2. That I have read and agree to abide by the club code of conduct whenever I am present at club activities or competition

Signature	
Print Name	

“When you become a member of or renew your membership with Northern Athletics Club you will automatically be registered as a member of England Athletics. We will provide England Athletics with your personal data which they will use to enable access to an online portal for you (called MyAthletics). England Athletics will contact you to invite you to sign into and update your MyAthletics portal (which, amongst other things, allows you to set and amend your privacy settings). If you have any questions about the continuing privacy of your personal data when it is shared with England Athletics, **please contact** dataprotection@englandathletics.org.”

Members and parent/guardian, where applicable, agree when competing, for the member's name, event category, result and position for the event(s) entered to be published within the Club's Social media, local press and Power of 10 UKA recognised results services, together with a permanent entry in the Club's historical records.

The Club's Privacy Statement may be found on the Club's Website www.northernaciom.com

Are you happy for your child to be photographed/recordings made and the images/recordings used for publicity purposes in accordance with NAC's photographic policy **Yes/No (Delete as appropriate)**

Please return completed form together with the membership fee to:-

Michelle Sherry, 34 Ballaterson Fields, Ballaugh, Isle of Man, IM7 5AP
Mobile: 492009 Email: naciom@outlook.com