

Scarborough Paragon Cycling Club

APPLICATION FOR MEMBERSHIP

I hereby submit application for membership of the Scarborough Paragon Cycling Club and agree, if elected, to abide by all rules and regulations set by the committee in addition to following the Highway Code.

NAME/S:

(BLOCK CAPITALS)

TYPE OF ANNUAL MEMBERSHIP: (please tick the relevant box)

Senior £12

Family £20

* Please list all family members' names and dob

Junior/Juvenile £6
(12-18 years)

Second Claim £6

Associate £6

DATE/S OF BIRTH:

ADDRESS:

TELEPHONE No:

email ADDRESS:

(By supplying your email address you agree to be contacted this way by the General Secretary for all communications where relevant). Please state "BY POST" in the email address box if preferred.

SIGNATURE OF APPLICANT:

DATE:

****To be completed if applicant is under 18 years of age:**

I hereby give my consent for the above named applicant to become a member of, and compete with, the Scarborough Paragon Cycling Club.

SIGNATURE OF PARENT/GUARDIAN:

Proposed by:

Seconded by:

PLEASE SEND COMPLETED APPLICATION FORMS TO:

Elaine Ward, 4 The Pastures, Cayton, Scarborough, YO11 3UU, with the relevant subscription fee made payable to Scarborough Paragon CC. Thank you.