



Print off, sign and forward to the Membership Secretary,
and email the completed Word Doc to membership@kingstonrc.co.uk

KINGSTON ROWING CLUB

APPLICATION FOR ADULT MEMBERSHIP

PERSONAL DETAILS (PLEASE 'TAB' BETWEEN FIELDS)			
Surname	.....		Mr/ Miss/ Mrs/ Ms/ Other.
Firstname	.....	Initials	Used Name
Address	..... ..... .....		Telephone: Home: Work: Mobile:
	Post Code	.....
E-mail Address1:	.....	
E-mail Address2:	.....	
Occupation			Date of Birth (dd/mm/yy):
Member of other Rowing Clubs?			Kingston Uni Graduation Year:

MEMBERSHIP CATEGORY	FULL CASUAL KU FULL KU FRESHER SOCIAL COX
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HEALTH AND SAFETY DECLARATION		
<i>There are potential health risks associated with strenuous exercise. Anyone who might be at risk, due to a prior or current illness or injury is advised to consult their medical practitioner prior to any exercise.</i>		
I am able to swim at least 50m in light clothing	Y or N	Do you suffer from any medical condition that may affect your ability to row? Y or N. Please inform your Coach. Details:
I am able to tread water for at least 2 minutes	Y or N	
I am able to swim underwater for at least 5 metres	Y or N	

APPLICATION FOR MEMBERSHIP		
<i>...the Executive Committee shall not vote on election of such candidate until the receipt by the Club of an amount equal to the first subscription payable by the Candidate (Extract from Rule 6)</i>		
Amount received £ <small>Subs due on 1st October every year</small>	Confirmed:	Date received://

DECLARATION
I hereby confirm my application for membership of Kingston Rowing Club ("the Club"), and if elected, I agree to abide by the Rules of the Club as may be amended from time to time, and recognise that I will be required to comply with the Row Safe water safety guidance of British Rowing. I have read and understood the Club Safety and Boating Plan (available on the Kingston Rowing Club website).

Applicant's Signature:	Date:
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Committee Signature:	Date elected
Name:	Committee//

23/10/13 AT

