

Amersham Road Cycling Club Club Membership Form

We are pleased to welcome you to our club. To ensure that we have the correct contact details for you, please insert the information requested below and return this form together with your cheque for the membership fee to:

Andrew Jackson, Membership Secretary
54 Wycombe Road, Prestwood, Great Missenden, Bucks, HP16 0PQ

Information for Parents/Guardians

Those under the age of 13 must be accompanied by an adult parent or guardian.

It is necessary to obtain parental consent for young people under the age of 18 to take part in club rides, whether accompanied by a parent/guardian or not.

If you wish your son/daughter to participate then complete the attached Parental Consent Form.

Personal Details of Individual

Name: _____ Gender: Male Female

Address: _____

Postcode: _____

Date of Birth: _____ Email: _____

Telephone Home: _____ Mobile: _____

Occupation: _____

Disability Information

The Disability Discrimination Act 1995 defines a disabled person as anyone with, 'a physical or mental impairment, which has a substantial and long-term adverse effect on his or her ability to carry out normal day-to-day activities.'

Do you consider yourself to have a disability? Yes No

If yes, what is the nature of your disability?

Visual Impairment Hearing Impairment Physical Disability

Learning Disability Multiple Disability

Other (please specify): _____

Cycling Information

Have you taken part in much cycling before? Yes No

If yes, where have you taken part? (please indicate below)

Primary School Secondary School Local Authority Coaching Session(s)

Club Other (please specify): _____

Are you a member of British Cycling: Yes / No

Medical Information

Please detail below any important medical information that our club should be aware of (e.g. epilepsy, asthma, diabetes, a recent injury, etc).

Medical condition (s) and recommended treatment/actions to be taken if symptoms appear:

If you have any concerns about participating in any form of physical activity then please consult your GP before taking part in cycling activities.

- I have third party insurance cover to take part in club events, and any race activities I intend to participate in.
- I agree / do not agree (please delete as appropriate) to my photograph being taken and used in publicity materials for the purposes of promoting Amersham Road Cycling Club.
- I agree / do not agree (please delete as appropriate) to my personal details being kept on a database for the sole purpose of communication of club information.

Signature of Member:

Date:

British Cycling Membership Number (if applicable):

Once completed please return this form together with your cheque to:

Andrew Jackson, Membership Secretary
54 Wycombe Road, Prestwood, Great Missenden, Bucks, HP16 0PQ

Membership Fees: Flat Rate for all First and Second Claim Members = £12

Amersham Road Cycling Club - Parental Consent

A young cyclist is welcome to join one of Amersham Road Cycling Club's group rides when his or her parents judge that he or she is mature enough to cope with traffic and strong enough to complete the ride.

- Saturday rides cover around 25-30 miles
- Sunday rides cover around 35-40 miles with a cafe stop around halfway
- Wednesday rides cover around 20-25 miles (Summer months only)

Those under the age of 13 must be accompanied by an adult parent or guardian.

Young people may find the experience of joining in a club ride less daunting if a parent or another trusted adult comes along at least to begin with. If, however, a young person (over the age of 13 and under 18) takes part unaccompanied, the ride leader needs to know he or she is there with parental consent. The young person and his/her parents should read the *Guide to Friction Free Riding* on the Amersham Road Cycling Club website.

The rides are not coached sessions and there is not an organiser with legal responsibility for other riders. A club ride is simply a group of riders on a joint excursion on the open road which may include sections on busy roads.

It is the responsibility of parents/guardians to ensure that participants' bikes are in a safe condition to ride. The riders are expected to be self-sufficient and should bring their own drinks and snacks, and a spare inner tube.

All participants under the age of the 18 must wear a cycling helmet at all times during club rides.

It is necessary to obtain parental consent for young people under the age of 18 to take part in club rides, whether accompanied by a parent/guardian or not. If you wish your son/daughter to participate then complete the attached form and return to Rachelle Hembury, Club Welfare Officer.

Young people and parents should consider the benefits of developing their skills before joining club rides. Amersham Road Cycling Club has registered with the British Cycling Go-Ride scheme, a programme to promote youth participation in cycling by working with local schools and other organisations.

Go-Ride Coaching Sessions are being planned for Spring/Summer 2009

For more information about coaching contact Chris German at chris@amershamrcc.co.uk

Amersham Road Cycling Club - Parental Consent**Parental Consent**

I, being the parent/carer of _____ have read the information contained on this form and on the Amersham Road Cycling Club website and hereby consent to my child participating in an ARCC club ride and understand and agree that my son/daughter attends the ride entirely at his/her own risk. I have considered the nature of such club rides and have discussed them with my son/daughter. I am satisfied that my son/daughter is sufficiently responsible and competent to assume full and entire responsibility for his/her own safety.

- By returning this completed form, I agree to the child named above taking part in the activities of the club
- I understand that I will be kept informed of these activities - for example timing and transport details
- I understand that in the event of any injury or illness all reasonable steps will be taken to contact me, and to deal with that injury/illness appropriately

Name of Parent/Carer:

Signature of Parent/Carer:

Date:

Participant's Details

Name:

Address:

Postcode:

Date of Birth:

Home Telephone:

Emergency Contact Details

Please indicate below the person who should be contacted in case of an incident/accident

Contact Name:

Relationship to Participant:

Emergency Contact Numbers

Home:

Mobile:

Medical Information

Please detail below any important medical information that our coaches/club should be aware of (e.g. epilepsy, asthma, diabetes, a recent injury, etc).

Medical condition (s) and recommended treatment/actions to be taken if symptoms appear:

If you have any concerns about your child participating in any form of physical activity then please consult your GP before giving permission for your child to take part in a club ride.

Once completed please ensure this form is returned to:

Rachelle Hembury, Club Welfare Officer
71 Longcroft Avenue, Halton, Bucks, HP22 5PT

Any information contained on this form will be kept confidential and secure and only used by Amersham Road Cycling Club.