

Membership Application Form



Name _____

Address _____

Post Code _____ Tel/Mobile _____

Email _____

(please print your email address clearly so we can confirm your membership)

Date of birth _____ Gender _____

Have you previously registered with another running club? **Yes/No**
If so, what is the name of the club? _____

Notes for all members:

The ethos of our club is that no-one is left behind on club runs. If someone in the group is struggling you are expected to muster from the front to the back – please don't just wait for them to catch up as it can be demoralising.

Your group leader is a volunteer who has agreed to set the pace and distance for the run and requires your support to ensure the safety of the group. Please be guided by your leader. Failure to do so could result in your membership being cancelled.

Remember to think about safety, not just when crossing roads but also when running over uneven land, in dusk or in the dark conditions. Wearing fluorescent/high visibility clothing is recommended. In the event of someone becoming injured a minimum of 2 people must stay with the injured member until help arrives.

If you are new to exercise or have not exercised for some time you are recommended to visit your doctor before running with the club.

Please read the club's Health & Safety policy and Risk Assessments for further guidance. These can be found on our website – www.blackpearjoggers.org.uk

The membership fee is £12 per year (1st April – 31st March).

Please make cheques payable to: **Black Pear Joggers** and forward them to the address below. We will contact you by email where possible to advise you when your membership details have been updated.

By signing and returning this form I understand and accept that:

- I am declaring that I am an amateur as defined by the eligibility rule of UK Athletics.
- I take part in the club's activities entirely at my own risk and that I will be responsible for my own safety whilst out running with the club or when I take part in events as a club member.
- I have read the Health & Safety policy and Risk Assessments on the Black Pear Joggers website.

Signed _____ Date _____

Please return completed forms and cheques to:
Membership Secretary – Black Pear Joggers
c/o 1 Carisbrooke Avenue, Worcester, WR4 0QJ