

# BARNSELY HARRIERS

## MEMBERSHIP

### application

As well as this form, Shaw Lane would like you to complete their membership form too(attached). You must at least provide personal details on Page 1 and sign Page 3. However providing the other information will help the development of the Club and the site for the future.

Your £25 fee (or £12.50 for non-runners) includes £10 as your Social subscription at Shaw Lane, subscriptions to England Athletics and Yorkshire Vets and our rent for the use of facilities at Shaw Lane. The remainder finances items such as internal trophies and prizes, postage/stationery, the club magazine and team race entry fees.

Block capitals please

## NAME & ADDRESS

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Post Code \_\_\_\_\_

Gender (*Male or Female*) \_\_\_\_\_ Date of Birth \_\_\_\_\_ Ethnic Origin \_\_\_\_\_

## CONTACT

Home Telephone \_\_\_\_\_ Work Telephone \_\_\_\_\_

Mobile \_\_\_\_\_ Email \_\_\_\_\_

## MEMBERSHIP OF OTHER CLUBS

Other Clubs of which you are a member \_\_\_\_\_

Status (*ie first/second claim*) \_\_\_\_\_

Previous Running Club \_\_\_\_\_

Date of resignation from previous Running Club \_\_\_\_\_

## COACH QUALIFICATION

Level \_\_\_\_\_ Event (s) \_\_\_\_\_

**Runners:** I enclose the sum of £25 for my subscription to Barnsley Harriers for the current year. (*Cheques payable to Barnsley Harriers*).

**Non-runners:** I enclose the sum of £12.50 for my subscription to Barnsley Harriers for the current year.

I confirm that I am eligible to compete under England Athletics Rules.

I **accept** that my personal data will be held on computer by the club.

I **agree** to the disclosure of my personal data in a list of members and to England Athletics.

(*Please tick as appropriate*).

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please return both forms to:**

Rachel Nothard (*Membership Secretary*), Barnsley Harriers, c/o The Old Vicarage, 17-21 Church Street, Darton, Barnsley. S75 5HF.

# Shaw Lane Membership Form (S)

We are very pleased to welcome you to Shaw Lane Community Sports Association  
To ensure we have the correct contact details for you, please fill out this Membership Form and return it to the person who gave it to you.

If you are under the age of 16 please also ask your parents / carer or guardian to sign the Membership Form before it is returned. We will also use this information to ensure that you are kept informed about events and information from Shaw Lane Community Sport Association.

## Section 1 – Personal Details.

Name:	<input style="width: 95%; height: 25px;" type="text"/>
Address:	<input style="width: 95%; height: 25px;" type="text"/>
Postcode:	<input style="width: 95%; height: 25px;" type="text"/>
Home telephone number:	<input style="width: 95%; height: 25px;" type="text"/>
Mobile:	<input style="width: 95%; height: 25px;" type="text"/>
Email:	<input style="width: 95%; height: 25px;" type="text"/>
Date of birth:	<input style="width: 95%; height: 25px;" type="text"/>
Name of your Sports Club	<input style="width: 95%; height: 25px;" type="text"/>

Whilst it is not compulsory that the following section is completed, the future development of Shaw Lane depends upon gathering this information.

## Section 2 – Ethnicity

A    White <input type="checkbox"/>	British <input type="checkbox"/>	Irish <input type="checkbox"/>
Any other white background (please specify):	<input style="width: 95%; height: 25px;" type="text"/>	
B    Mixed <input type="checkbox"/>	White & Black Caribbean <input type="checkbox"/>	
White & Asian <input type="checkbox"/>	White & Black African <input type="checkbox"/>	
Any other mixed background (please specify)	<input style="width: 95%; height: 25px;" type="text"/>	
C    Asian or Asian British <input type="checkbox"/>	Pakistani <input type="checkbox"/>	
Indian <input type="checkbox"/>	Bangladesh <input type="checkbox"/>	
Any other Asian background (please specify):	<input style="width: 95%; height: 25px;" type="text"/>	

D Black or Black British  Caribbean  African

Any other Black background (please specify):

E Chinese

Any other (please specify):

### Section 3 – Disability

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):

### Section 4 - Sporting Information

Have you played sport before? Yes  No

If yes, where have you played sport: (please indicate below)

Primary school  Secondary school

Local authority coaching session(s)  Club

Country

Other (please specify):

### Section 5 – Medical Information

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

I hereby apply to become a member of Shaw Lane Community Sports Association and include the appropriate membership fee.

Signature.....

Date.....

**Section 6 – Emergency Contact Details**

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

Emergency Contact Person 1:  
Name:

Emergency Contact Person 2:  
Name:

Relationship to individual:

Relationship to Individual:

Home Tel:

Home Tel:

Work Tel:

Work Tel:

Mobile Tel:

Mobile Tel:

By returning this completed Membership Form, I agree to my child in my care taking part in the activities of Shaw Lane Community Sports Association.

I understand that I will be kept informed of activities at Shaw Lane Community Sports Association – for example times and transport details etc...

I understand in the event of injury or illness all reasonable steps will be taken to contact me, and to deal with that injury/illness appropriately.

If you are under the age of 16 please also ask your parents/carer or guardian to sign the Membership Form before it is returned.

**Name of parent/carer/guardian:**

**Signature of parent/carer/guardian:**

**Date:**

**With reference to Section 2 on this Membership Form:**

Sport can and does play a major role in promoting inclusion of all groups in society. However, inequalities have traditionally existed within sport, particularly in relation to gender, race and disability. The England and Wales Cricket Board and Sport England are committed to promoting and developing sports equity, which is about fairness in sport, equality of access, recognising inequalities and taking steps to address them. By monitoring the profile of young people in sports clubs, national governing bodies of sport and Sport England can identify any issues relating to under-representation of different groups and can together develop strategies to ensure all young people have an opportunity in the future development and progress in sport.