

## SALE HARRIERS MANCHESTER NEW Membership Application 2024

Crossford Bridge Wythenshawe Park Sportcity

Your first subscription is due with this application. Renewal is due on the 1st January each year thereafter

Personal Details			
Full Name: Address:	Title Street Address	First	Last
Tel No:	City		Post Code  Mob:
Email:			Date of birth:
Gender [	<b>f</b> □	Group	o / Coach (if known):
Training Ve	nue	<u>c</u>	Claim Status
Crossford Br	idge		☐ 1 <sup>st</sup> Default
Wythenshaw	/e		2 <sup>nd</sup> : Please state 1 <sup>st</sup> claim club
Sportcity			
Membership Category			
	ts		
 £35 –Adult	ts in full time education;	college/uni:	Course end date://
☐ £35 –Young Persons (Under 20 years old at 01/01/23); incl. full competition license if aged 11+			
£20 –Associates (non-athletes who do not train with the club or compete representing the club)			
£0 – Additional family members, maximum 1 per household. (Only available where two adult athletes within the same lousehold are paid-up members).			
Paid-up members' names:			
athletics. I agree hysical activitie ppropriate. by joining Sale I nd any reprodu	e to abide by the constitutions. When signed by a parer Harriers Manchester you gractions or adaptations of the	on and rules of Sale hat that parent consent ant Sale Harriers Materimages for fundrais	d understand my obligations under the rules of the national governing body, UK Harriers Manchester. As far as I am aware, I am fit to take part in strenuous atts to the child taking part in club events including travel and overnight stays where anchester full rights to use any images resulting from photography/video filming, sing, publicity or other purposes to help achieve the club's aims. This might include online publicity, social media, press releases and funding applications.
Signed: Date: To be signed by parent / guardian if under 16 years of age.			
o be signed by	parent / guardian if under	16 years of age.	
Payment: Cas	h	BACS	Sort code: 09-01-50 Acc. No: 04469283 Ref. 'Your Full Name'
/lanchester ar	cheques payable to Sale nd return this form to 16 Delaheys Road, Hale		Office use:  Accepted: Declined: Elec dateSHM No