



Please download and save down this form, complete your details and save again.

Please send the completed form as an attachment via email to [membership@saffronstriders.org.uk](mailto:membership@saffronstriders.org.uk). We are unable to accept paper copies.

Members must be 16 or over on date of joining

### Section A : Mandatory Athlete Details - Please complete all fields (for completion by the Athlete)

First Name		Last Name		Male or Female	M/F
Address		Postcode		Date of Birth	dd/mm/yyyy
Phone		Email			

### Section B : Only complete if Athlete is over 16 but under 18. Parent or Carer Details (for completion by the Parent or Carer)

First Name	of parent/carers	Last Name	of parent/carers	Phone	of parent/carers
Address	of parent/carers	Postcode		Email	of parent/carers

Signature	of parent/carers
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### Section C: Mandatory Medical Information and or Additional Support Needs - Please complete all fields (for completion by the Athlete)

Please note below any physical or mental medical information that we should be aware of that may affect you when running (e.g. epilepsy, asthma, diabetes, allergies, heart problems, joint problems, blood pressure, anxiety, ongoing injuries etc). Also please note here any issues that may make you less able and in need of additional support (e.g. impaired vision, loss of digits etc). This information may be shared if an accident or incident occurs that requires assistance. **Do NOT leave blank**, write **NONE** if that is the case. If you require medication, such as for asthma, you should always bring it to club events

Do not leave blank. Please write NONE if that is the case

By submitting this form or emailing it to the club I agree that SSRC will not be liable for any injury or illness resulting from my participation in any club activity or event. I understand that participation in this club is entirely at my own risk and I should consult my own doctor if I am suffering from any condition that might make running injurious to my health. I understand that it is for me to decide whether or not I am fit to run and I should not expect a coach or club member to make this decision for me, though they may offer advice. I consent that the medical and support information that I have given may be shared with coaches and other parties who provide the club with assistance and information on health and safety or for the purposes of the delivery of my safe participation in club activity.

### Section D: Emergency Contact Details - Please complete all fields (for completion by the Athlete)

Please complete the boxes below with details of who should be contacted in case of incident/accident

Name		Phone	
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### Section E: Beginners Course Fee Schedule for 2024 (includes club membership for the year April 2024 to March 2025 (for completion by the Athlete)

The 2024 Beginners Course fee is £60\*

When we get your membership application form we will arrange for England Athletics to email you with instructions on how to pay by card.

As soon as we get your application form and payment, we register you with England Athletics and order your shirt and ICE tags. We have to pay for all of these up front, so if you don't start the course or you drop out for any reason, we are sorry but there are **no refunds** because your payment to us has already been spent.

\* If you having difficulty in your membership fee, kit or race entry fees, would you like to be contacted confidentially by a Club Welfare Officer to see if help is available from our Bursary Fund? If so please mark this box. Alternatively email [welfarefemale@saffronstriders.org.uk](mailto:welfarefemale@saffronstriders.org.uk) or [welfaremale@saffronstriders.org.uk](mailto:welfaremale@saffronstriders.org.uk)

### Section F: Additional Details - Please complete all fields (for completion by the Athlete)

Please let us know what name you would like printed on the front of your shirt (Usually first name or nickname), and the size of shirt you would like. If you are unsure of sizing, just leave blank - the coaching team will bring some sample shirts to the first session for you to try, so all choices can be confirmed then:

Name		Size	XS, S, M, L, XL, XXL, XXXL
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How did you find out about this course? We are continually looking at ideas to improve and adapt how we run our club, and your feedback is invaluable

### Section G: Agreement - Please complete all fields (for completion by the Athlete)

By submitting this form I agree that I will abide by Club Constitution and Rules which can be found on the SSRC website. I also confirm that I have read and agree to The Code of Conduct for Athletes, Privacy Statement, Insurance Statement and Photography Statement supplied to me on a separate document. If I do not have that document I can access this via the SSRC website or request a copy from [membership@saffronstriders.org.uk](mailto:membership@saffronstriders.org.uk)

Signature of Athlete		Please type your name in the 'Signature' box, there is no need to scan a real signature	Date	dd/mm/yyyy
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After completing your form please remember to save it before sending the saved copy as an attachment to your email (to avoid sending a blank). Thanks!