



## Membership Application Form

<b>Name:</b>	
<b>Address:</b>	
<b>Telephone number:</b>	
<b>E-mail address:</b>	
<b>Date of birth:</b>	
<b>Membership category:</b> (Please select one)  <i>A signed parental consent form must also be completed for all children under 18 years of age</i>	Senior (over 18) - £35  Junior (under 18) - £10

All applicants/members will be asked to sign the following consent which will refer directly to the A5RCC Data Protection Policy.

I consent to A5 Rangers Cycling Club processing my personal data in accordance with its published Data Protection Policy which is available online at [www.a5rangerscyclingclub.org.uk](http://www.a5rangerscyclingclub.org.uk). Then click: **About us**. Then click: **Join the A5RCC**. A copy is also displayed on the Clubroom Notice Board at 101 Watling Street, Towcester, NN12 6AG.

I understand that I may review, or request my data is destroyed at any time and that it will be dealt with and destroyed as laid-out in the club Data Protection Policy.

I understand that all queries and requests regarding data are to be made to the **Data Controller**, currently **[johnwrighter@gmail.com](mailto:johnwrighter@gmail.com)**

I understand that returning this form signed below in paper form, or by email with my name filled in and from my personal email address will constitute acceptance.

Please send the completed membership application form to: Membership Secretary, A5 Rangers Cycling Club, 101 Watling Street, Towcester, NN12 6AG or by email to [a5rangers.membership.secretary@gmail.com](mailto:a5rangers.membership.secretary@gmail.com)

Payment can be made by bank transfer to A5 Rangers Cycling Club, Sort Code **30-18-83** Account Number **12127760** (please ensure you use "**Your Name – SUBS**" as the payment reference) or by cheque made payable to "A5 Rangers CC".

If you have a medical condition that could affect you whilst riding with us (e.g. epilepsy, asthma, a recent injury, etc) it is your responsibility to bring this to the attention of the ride leader before any club ride you participate in. If you have any concerns about participating in any form of physical activity then please consult your GP before taking part in cycling activity sessions.

I also hereby grant the A5RCC the right to use photos and or videos for all general purposes in relation to the activity of the club. If you do not consent to this please inform the club Data controller as given above in writing. This action will not affect your application for membership of the A5RCC. As the A5RCC is an Affiliated Member of Cycling UK the full Privacy Policy can be found at [www.cyclinguk.org/privacy](http://www.cyclinguk.org/privacy)

I apply for membership to the A5 Rangers Cycling Club. If accepted, I agree to abide by the rules and regulations of the Club.

My annual subscription of £ \_\_\_\_\_ has been paid by Bank Transfer / Cheque is enclosed.

<b>Date:</b>	<b>Signature:</b>
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