

## Rudyard Sailability

### MEMBERSHIP APPLICATION FORM

**For safety reasons a medical questionnaire must be completed before taking part in any activities.**

A medical questionnaire can be downloaded from [www.rudyardsailability.org.uk/membership](http://www.rudyardsailability.org.uk/membership)  
To be completed in full by applicant or their deputy (BLOCK LETTERS – BLACK INK)

| <b>APPLICANT DETAILS</b>                                |  |
|---|--|
| TITLE   |  |
| SURNAME   |  |
| FIRST NAME  |  |
| ADDRESS   |  |
| TELEPHONE (home)  |  |
| (mobile)  |  |
| E-MAIL  |  |
|   |  |
| DATE OF BIRTH   |  |
| <b>TYPE OF MEMBERSHIP</b>                               | <b>Adult £35</b> <input type="checkbox"/><br><b>Junior (under 18) £20</b> <input type="checkbox"/><br>For Group and Family memberships please download a form from our website: - <a href="http://www.rudyardsailability.org.uk/membership">www.rudyardsailability.org.uk/membership</a> |
| PREVIOUS SWIMMING / SAILING EXPERIENCE / QUALIFICATIONS |  |
| <b>NEXT OF KIN / CARER</b>                              |  |
| NAME  |  |
| ADDRESS   |  |
|   |  |
|   |  |
| TELEPHONE (home)  |  |
| (mobile)  |  |
| E-MAIL  |  |

**FEES : Annual membership: Adult £35 / Junior £20 (under 18 years)**  
**(cheques to be made payable to Rudyard Sailability)**

GIFT AID DECLARATION: I am a UK tax payer and I would like my donation to be tax effective under the gift aid scheme.

Signature ..... Print Name ..... Date .....

In accordance with the Data Protection Act 1987 your details will only be used for the purpose of Rudyard Sailability membership and will not be passed on to any third parties.

**Sailing for People who Live with Disability**