



[www.slinnallstars.co.uk](http://www.slinnallstars.co.uk)

## SLINN ALLSTARS RUNNING CLUB REGISTRATION FORM

Full Name:..... DOB:.....

Address: .....

.....

..... Postcode: .....

Home Phone: ..... Mobile:.....

Email: .....

Medical Conditions: YES/NO

If YES give details: .....

Medication: YES/NO

If YES give details: .....

Consulted Doctor: YES/NO

**Emergency Contact Name:** .....

**Emergency Contact Telephone/Mobile:** .....

T-Shirt Size: SMALL/MEDIUM/LARGE/X-LARGE/OTHER

### **Declaration**

- I am aware of and understand the potential risks associated with physical exercise and I am voluntarily partaking in the activity at my own risk. I have had an opportunity to ask questions regarding this activity and any questions have been answered to my satisfaction. The above information has been completed to the best of my knowledge and belief. I understand that if there are any changes in my health and/or conditions at all I must inform **Slinn Allstars Co Ltd** as soon as they are known. Without prejudice to the above, **Slinn Allstars Co Ltd** accepts no liability for any loss or damage of whatsoever nature and however arising caused to me or suffered by me whilst partaking in this activity.*
- I have read and understand the **Slinn Allstars Co Ltd - Risk Assessment**, which is available online or hard copy at St John's Church Hall. Having studied the Risk Assessment if I have any queries or concerns, I will raise them at the earliest opportunity with either the Chairman or Secretary of **Slinn Allstars Co Ltd** both of whom are identified on the **Slinn Allstars Co Ltd** website.*
- Slinn Allstars Co Ltd** will use your personal data for the purposes of your involvement in club activities. I understand that by submitting this form I am consenting to receiving information about the club by post, email/MMS, online or phone. Your data will not be shared with any third party and the principles of the Data Protection Act 1988 will be adhered to.*

*Data will be shared with **England Athletics** to meet membership requirements. **England Athletics** will use personal data only for the purpose of your involvement in athletics. I understand that by submitting this form, I am consenting to receiving information from **England Athletics** about athletics, including my **England Athletics** membership details, by post, email, or phone unless stated otherwise.*

Date: ..... Signature:.....