



Charlestown
Rowing Club

www.charlestownrowingclub.org.uk

Adult Membership Application Form 2018

Name		Next of kin	
Address		Relation	
Postcode		Address	
DOB:			
Tel Mobile:		Tel Mobile	
Tel Home		Tel Home	
E-Mail:			

RENEWAL OF MEMBERSHIP	Tick Box	Annual Subscription	
Full Adult Rowing: (16 & over)	<input type="checkbox"/>	£88	
Student: 16 – 21 & in full time education	<input type="checkbox"/>	£60	
Social: (non-rowing)	<input type="checkbox"/>	£20	
NEW MEMBERSHIP	Tick Box	Annual Subscription	Pro Rata * Monthly Sum
Full Adult Rowing	<input type="checkbox"/>	£88	£7.00
Student Member	<input type="checkbox"/>	£60	£5.00
Social: (non-rowing)	<input type="checkbox"/>	£20	N/A

New Member ONLY	Monthly cost x Number of Months left in Membership year e.g. Join in March = 10 x monthly sum; Join in April = 9 x monthly sum etc	£
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I wish to apply for Membership of Charlestown Rowing Club.
I have read and understood the CHARLESTOWN ROWING CLUB POLICIES, SAFETY CODES and HANDBOOK and the BRITISH ROWING 'ROWSAFE' HEALTH AND SAFETY DIRECTORY and agree to abide by the Charlestown Rowing Club and CPGA rules and the BR Rowsafe.

Note: Club Handbook, Policies and Safety information are available via website: www.charlestownrowingclub.org

Signed	Date...../2018
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Please return completed form and correct membership fee to:
Sheleagh Pears 3 The Old School, Charlestown Road, Charlestown PL25 3NL
 (Cheques payable to Charlestown Rowing Club)
Please now complete the questionnaire on the reverse of this form. Incomplete forms will be returned

Health Questionnaire

<p>Rowing Pilot Gigs is strenuous exercise and some people should check with their GP before they start becoming more physically active. If you have any questions about this section consult a Rowing Captain or any Senior Committee Member. If you answered YES to one or more of the questions below please visit or speak with your GP and sign the declaration below before participating in these water sports activities.</p>	YES	NO
Have you ever fainted or become dizzy whilst exercising or have you ever had chest tightness, cough, wheezing which has made it difficult for you to perform sport?		
Has your GP ever said that you have a heart condition? Or is your GP currently prescribing drugs for your blood pressure or heart condition?		
Do you feel pain in your chest when you do physical activity?		
In the past month, have you had chest pain when you were not performing physical activity?		
Do you lose your balance because of dizziness or do you ever lose consciousness?		
Do you have a bone or joint problem that could be made worse by rowing or a change in your physical activity?		
Have you ever suffered from Epilepsy?		
Have you routinely taken any medication in the last two years?		
Have you ever had Rheumatic Fever?		
Do you have Asthma? Do you use Salbutamol, Ventolin etc.		
Any health problems or other relevant information? (e.g. Hearing or visual problems).		
Do you know of any other reason why you shouldn't row or exercise?		
<p>I confirm that I have I have read, understood and completed this questionnaire. I have fully declared all relevant medical conditions and any other conditions and any information which may be relevant to my personal safety and the safety of the Coxswains and other crew members. I have informed the club of any reason that I may be at risk due to current or previous conditions, illness, or injury. If I have answered YES to any of the above questions I confirm that I have seen my GP who has affirmed that I am able to safely participate in such water sports.</p> <p>I undertake to update Charlestown Rowing Club about relevant changes in status, circumstance or health which may affect any of the activities I undertake as a Member of the club, including (but not limited to): changes in medical / health conditions; address and contact details; Emergency contact information.</p>		
I certify that I am able to swim in the sea in excess of 100 metres unaided	YES	NO
Signed	Date/2018	