Kirton in Lindsey Archery Club



Beginners Course Application Form

Applicants Name	Title	
Name (Parent or Guardian if U18)	Title	
Address		
Contact Phone Number		
Email address		
Applicants Date of Birth	Age (if U18)	
Left or Right handed		
Height		
Any relevant medical	e.g. Impaired sight Diabetes	
conditions *		Epilepsy
Duefermed Corres Charle Date		Impaired mobility
* This information will be treated in absolute confidence and will only be used by your coaches to determine the most		
appropriate equipment and teaching styles to suit your personal needs.) The club sometimes uses photographic images taken at club events for publicity purpose, including publishing on the club's web site and use both at a local and national level. I understand that I can withdraw permission, at any time, by writing to the club secretary. I consent for the club to use photos of me Yes [] No [] I understand that to allow the effective operation of the club it will be necessary for the club to maintain records of the personal data outlined above. I consent to this information being held by the club for this use, subject to the provisions of all relevant legislation. I understand that the club will hold data for 6 months after my course ends before being deleted unless I become a club member. Signature		
Signature	Date	
In case of emergency: Name and contact details, include address, phone number and relationship to beginner.		
 Please wear comfortable clothing, but ensure sleeves are not loose fitting, and for safety reasons tie long hair back and remove all upper body piercings before shooting. Send the completed form and cheque, made payable to "Kirton in Lindsey Archery Club" to the value of £50, to KLAC, 16 Dunstan Villas, Kirton in Lindsey, Gainsborough, Lincs, DN21 4DL. For BACS payment please email treasurer.klac@gmail.com for details. 		

Payment Received ___

For club use only

Course Start Date ___