



City of Norwich Archers



Membership Form

We are very pleased to welcome you to City of Norwich Archers / Junior Archers. To ensure that we have the correct details for you, if you could please fill out this form and return it to a member of the committee. If you are under 16 we ask that your parents or carers sign this form before returning it. Some of the questions included in this form we are required by the National Governing Body to ask.

Personal Details

Name: _____ Date of Birth: _____

Address: _____ Gender: _____

Contact Phone Number: _____ Email: _____

ArcheryGB Membership Number, if already a member: _____

Emergency Contact Details

Name: _____ Relation: _____

Address: _____

Contact Phone Number: _____

Second Emergency Contact Details

Name: _____ Relation: _____

Address: _____

Contact Phone Number: _____

Medical Details:

Please supply any information about any medical conditions relevant to the individual. It is important that coaches/junior coordinators are aware of any medical details.(e.g. Epilepsy, asthma, diabetes etc)

Disability

The disability Act 1995 defines a person as anyone with 'a physical or mental impairment, which has a substantial and long term adverse effect on his or her ability to carry out normal day to day activities'.

Do you consider yourself to have a disability? Yes No

If yes what is the nature of your disability?

Visual impairment

Learning disability

Other

Physical disability

Multiple disabilities

Hearing impairment

Would rather not say

Membership Fees

Below are our membership fees for the 2018/19 season.

Club Membership	Rate
Outdoor Season Club Membership (April to September)	40
ArcheryGB Membership (April to September)	Rate
Senior Member (Aged 25 and Over)	28
Senior Member (Aged 18 to 24 inc.)	11
Junior (Under 18s)	11
Archer With Disabilities	11

Payments can be made by cash, cheque (payable to "City of Norwich Archers") or bank transfer to:

Account Name: City of Norwich Archers
Sort Code: 30-96-17
Account Number: 8299 6460