

Individual Membership form

Please complete the form in Capitals in BLACK ink Club Name Personal Details First Name Other Names/Known as Surname 1 Date of Birth 1 Gender Male Female Ethnicity (please tick as appropriate) White English Other Scottish Welsh Irish Mixed White & Black Caribbean White & Black African White & Asian Other Asian Indian Pakistani Bangladesh Other Black Caribbean African Other Chinese Chinese Other Please Specify Prefer not to state **Contact Details** Address Area Town/City County Post code Home Telephone Mobile Telephone Email Club Status Volunteer Status Please tick what status the athlete is to the club: Please tick what status of volunteer: First Claim Second Claim Club Officer Helper **Higher Competition** Foreign Athlete Coach Technical Officer

Data provided on this form will be stored on a database managed on behalf of England Athletics by Athletics Services. Personal contact information will be used to send a competition licence / membership card and seek appropriate data clearances.