



# SHETTLESTON HARRIERS

ESTABLISHED 1904

NIHIL SINE LABORE

<http://shettlestonharriers.org.uk>

*'Committed to equality of opportunity in sport'*

*Athletics is competition*

*Anyone joining the club will be expected to compete as recommended by the coach in charge*

## MEMBERSHIP APPLICATION FORM

FULL NAME:-.....

ADDRESS:-.....

.....POSTCODE.....

E-MAIL ADDRESS.....

(Please note the email address must be someone over the age of 16 years of age)

TELEPHONE:-.....

DATE OF BIRTH:-.....

Are you, or have you ever been, a member of another club ? .....

If so, please state club and dates:-.....

Scottish Athletics Reg. No.(If any).....

DECLARATION:- I hereby declare that I will abide by the rules of Scottish Athletics Limited, and I also agree to abide by the constitution, bye laws and code of conduct of Shettleston Harriers.

SIGNATURE (parent or guardian if under 18):-.....

DATE:-.....

## DATA PROTECTION / HEALTH INFORMATION and CONSENT

**Your details are kept within the club's database and will not be released to any third party, without your prior consent.**

**Note:** The medical profession takes the view that the parent's consent to medical treatment cannot be delegated. Thus medical consent forms have no legal status and a doctor/nurse insisting on the consent of a parent to a particular treatment has the right to do so. For this reason we do not recommend that the Senior Coach insists on parents signing the statement overleaf. However, it can be a comfort to medical staff to have general consent in advance from parents or to have a leader on hand able to sign forms required by medical authorities.