

Membership Form

Please Complete and Return with your Payment to:

Ipswich Sports Club, Henley Road, Ipswich IP1 4NJ

Tel: 01473 251143 Fax: 01473 225733

SUBSCRIPTIONS			
Please Circle Category As Required			
<i>Category of Membership</i>	<i>Annual £</i>	<i>Monthly £</i>	<i>Joining Fee £</i>
Individual	470.00	42.00	45.00
Partners	840.00	74.00	80.00
Family	975.00	86.00	85.00
University Student <i>(non-local)</i>	95.00	-	15.00
Junior / Student <i>(local)</i>	215.00	19.00	25.00
Off-Peak	310.00	28.00	45.00
Hockey Individual <i>(12-month)</i>	310.00	28.50	45.00
Senior Peak <i>(Over 65's)</i>	342.00	31.00	45.00
Senior Off-Peak <i>(Over 65's)</i>	275.00	25.00	45.00
Social	50.00	-	-
Guest Fees			
<i>Studio Classes</i>	£4.50 Core	£5.50 Yoga	
<i>All Other Sports (Day Pass)</i>	£7.00 Adults	£5.00 Juniors	
Indoor Tennis Light Fees			
<i>Per half hour</i>	£1.00		
Other Fees			
<i>Lockers</i>	Require £1 coin <i>(returnable)</i>		

Joining Fee - There is a one-off Joining Fee payable on signing up for membership of the club in the first instance, or if you return to the club after an absence of more than 6 months.

Payment Method - Payment is either Annually (in full - cash, cheques or credit or debit card), by Monthly Direct Debit, or as stated in membership category.

Cancellation - The club operates a one full calendar month cancellation policy from the date of notification, in writing.

Primary Member:

Title: _____

Surname: _____ Forename: _____

Address: _____

Post Code: _____

Tel: (H) _____ (Wk) _____

Mobile: _____

E-mail: _____

Date of Birth: _____

Please provide details of all people to be included in **Partners** or **Family Membership** Category

Additional Members:

Full Name: _____ Date of Birth: _____

Full Name: _____ Date of Birth: _____

Full Name: _____ Date of Birth: _____

Full Name: _____ Date of Birth: _____

Full Name: _____ Date of Birth: _____

Payment Method: Direct Debit: Annually:

Cheque made payable to Ipswich Sports Club

Amount: _____
Joining Fee:

Membership Fee: _____

Category of Membership: _____

Declaration:

I hereby agree that I shall pay all entrance fees and subscription due and that I shall be bound by the club constitution.

I note and agree that my membership and entitlement to club facilities shall not commence unless or until I have received confirmation of my membership number and have made payment of all sums due thereon.

Signature: _____ **Date:** _____

Ethnicity of Club Members

Please tick the box or state the numbers that best describes your ethnicity of your partner or family that are applying for membership. If you prefer not to disclose, please leave blank.

	Nos		Nos
White British		Asian/Asian British – Pakistani	
White Irish		Asian/Asian British Bangladeshi	
White Other		Asian or Asian British – Other	
Mixed – White & Black Caribbean		Black/Black British – Caribbean	
Mixed – White & Black African		Black or Black British – African	
Mixed – White & Asian		Black or Black British – Other	
Mixed – Other		Chinese	
Asian/Asian British - Indian		Other Ethnic Group	

Disability of Club Members

	TICK		TICK
Deaf		Physical disability	
Visually Impaired		Learning disability	
Hearing Impaired		Multiple disability	

Please add any Additional Relevant Information:

DECLARATION: I consider myself/my partner, my son/daughter* to be physically fit and capable of full participation and agree to notify Ipswich Sports Club of any relevant changes to any medical information that may be provided. Furthermore, in the event of an injury/sudden illness, I give my permission for myself/my partner/my son/daughter* to receive immediate first aid from Club Members, managers/coaches etc of Ipswich Sports Club or for Ipswich Sports Club to obtain emergency medical treatment. * Delete as appropriate.

Signed:	Date:	Relationship:

DECLARATION ON BEHALF OF JUNIORS/UNDER 18's.

It is a requirement of Ipswich Sports Club that parental/legal guardian consent is provided for participation, transportation and photography. Information regarding Safeguarding and Protecting Young People Policy is available from the Club. Please delete as appropriate where indicated by a * then sign and date at the bottom.

TRANSPORTATION: I consent to my son/daughter* travelling to venues for matches and training, in transport provided by the Club, which may include travelling in other players'/umpires etc private cars.

PHOTOGRAPHY: In some environments, particularly adult competition it is impossible to control photography by external parties. However, I am aware that there may be times that photographs and/or footage may be taken during matches and training sessions by approved agents and/or officers of Ipswich Sports Club. Such images shall only be used for publicity/training purposes in accordance with the Club Safeguarding and Protecting Young People Policy and Photography Policy. I give consent for my son/ daughter to feature in such photos/images. I only grant approved agents the right to use the images resulting from the photo/film shoots. This includes any reproductions or adaptations of the images for all general purposes, e.g. local newspapers, local magazines, other promotional articles (including flyers) and the club's website.

Signed:	Date:	Relationship: