**Membership Application Form   
2019/2020 Season**



A copy of this form must be completed by all members   
(including all individuals in family memberships)

**Section A - Your details**

Name: ……………………………………………………………………………………………………………….. Date of birth: ………………………………

E-Mail Address: ………………………………………………………………………………………………………………………………………………………….

Address: …………………………………………………………………………………………….………………………………………….…………………………..

……………………………………………………………………………………………………………………. Postcode: ……………………………………………

Mobile: ………………………………………………………………………………….

Emergency Contact Name: …………………………………………………………………………. Telephone: ………….………………………………..

Please tick annual membership applied for. Fee is due in advance by 31st March each year.

* Adult £90  FT Student / Pension £45  Family £140  Junior (11-16) £20*

Payment is by PayPal at **www.ilfracombepilotgigclub.org** by cheque payable to ***Ilfracombe Pilot Gig Club***, or by Bank Transfer – Acc. 19681568 Sort Code 309452 (please give member name and ’mem’ as the reference)

I understand that the assets of the Club will be transferred to a Charitable Incorporated Organisation (known as the ***Ilfracombe Pilot Gig Club*** during 2019 as agreed at the 2018 AGM. I am happy for my membership to be transferred on the same terms as laid out in this form.

By becoming a member of IPGC I am committing to be included on the IPGC Rowers’ Register. The CPGA permits inclusion on only one club's Register. Transfers must be made in writing to the CPGA by 1st August.

**Section B - Data Protection**

For the purposes of UK Data Protection legislation, Ilfracombe Pilot Gig Club notifies you that the above details may be kept on computer. Your contact details may be passed to Club Committee members and coxswains. Your medical details may be shared with the Club Safety Officer and coxswains if necessary. By applying to become a member you confirm that you have no objection. Our full GDPR policy is available at www.ilfracombepilotgigclub.org

**Section C - Membership Declaration**

 I have read and understood all sections of this form and have completed the rowing safety questionnaire and consent for junior rowers (if relevant) and I declare the information I have given to be correct.

 I confirm that I have read, understood and agree to abide by: (please tick to confirm)

 IPGC Club Rules  IPGC Club Constitution  IPGC Grievance Policy

All policies are available on the website [www.ilfracombepilotgigclub.org](http://www.ilfracombepilotgigclub.org) or from the Club Secretary.

 I consent to images taken in the course of club activities being used for promotion purposes.

 I am happy to be contacted by the Club Committee through facebook, text message, email and phone.

Please sign to say that you have read, understood and accept all the details on this form. A parent/guardian must sign for a child aged 16 or under.

Signed: ………………………………………………………………………………………………………………. Date: ……………………………………

Please print name: …………………………………………………………………………………………………………………………………………….

**Section D - Rowing Safety Questionnaire**

Rowing is a physically demanding sport and you are advised to consult with your Doctor to ensure that you are sufficiently fit to participate. **If you answer yes to any of the following questions, please check with your doctor that you are safe to row or take part in any other of our club activities.**

1. Have you ever fainted or become dizzy while exercising? Yes  No 
2. Have you ever had chest tightness, cough, wheezing which has made it difficult for you   
   to participate in sport or exercise? Yes  No 
3. Has your GP ever said that you have a heart condition? Yes  No 
4. Do you ever feel pain in your chest when you do exercise? Yes  No 
5. In the past month, have you had chest pain when not doing exercise? Yes  No 
6. Do you lose your balance because of dizziness or ever lose consciousness? Yes  No 
7. Do you have a bone or joint problem that could be made worse by a change in   
   your physical activity? Yes  No 
8. Have you ever suffered from epilepsy? Yes  No 
9. Have you routinely taken any medication in the last two years? Yes  No 
10. Have you ever had rheumatic fever? Yes  No 
11. Is there any other reason you know of why you should not exercise? Yes  No 

I have answered yes to one or more of the above questions and so have consulted with my GP to ensure that I   
 am ok to row.

Are you able to swim 50 metres unaided? Yes  No  (25 metres for junior members).   
Anyone who cannot swim the above distance, and all juniors, must wear a life jacket when they are in a gig boat.

**Illness**

Are you affected by any other medical condition which the club should be made aware? Yes  No    
If yes please give details below:

……………………………………………………………………………………………………………………………………………………………………………………..

**Disability**  
If you have any disability or other condition which may affect your time with us, please let us know so that our coxswains and safety officer can be made aware of it. Are there any reasonable adjustments the Club may be able to make to aid your participation? If so, please give details here:

Nature of condition ……………………………………………………………………………………………………………………………………………………

Any necessary adjustments: ………………………………………………………………………………………………………………………………………

…………………………………………………………………………………………………………………………………………………………………………………..

Note: All details given on this page will remain confidential to the Club Committee and will only be released to authorised first aid trained members and club coxswains. Should you suffer from a medical condition that affects your safety at any future time you should advise the Club Safety Officer.

**All training activities**The Club may offer participation in activities other than rowing, such as indoor winter training. As with all exercise, there is a genuine risk of injury. Please ensure that you are fit to participate before taking part. If you engage in these activities, you do so at your own risk, are voluntarily participating in these activities, assume all risk of injury to yourself, losses and damages, and agree to release and discharge Ilfracombe Pilot Gig Club and the session leaders, from any and all claims or causes of action, known or unknown, arising out of Ilfracombe Pilot Gig Club's negligence or the negligence of the session leaders or other participants.  
  
 Please tick here to state that you have read and understood the contents of this page.

**Section E - Junior Rowers Consent Form**

A parent or guardian must sign and complete this section. Please also refer to the code of conduct for parents of juniors and the juniors at regattas policy which can be found at www.ilfracombepilotgigclub.org

By applying for 11-16s Junior membership I understand that (please tick to acknowledge your agreement):

 I am giving my consent for my child (named below) to participate in club rowing, training and social activities.

 I agree to my child travelling by public transport or in a motor vehicle driven by members of the Ilfracombe   
 Pilot Gig Club.

 I agree in conjunction with other parents of U16 members to ensure adequate supervision of my child during regattas and overnight stays. (The club cannot be held responsible for any accidents/incidents involving my child once he/she has rowed and they have left the gig).

 I consent to medical treatment being given if found to be necessary by a qualified person.

 I have disclosed any relevant medical conditions in section B of the membership form.

My child’s GP surgery: ……………………………………………………………………………………………………………………………………

My child’s doctors name: ……………………………………………………………………………………………………………………………….

 My child and I understand that the instructions of club officials must be followed at all times and agree to any decisions they may make.

 I have read and understood the above information and confirm that my child has been instructed to follow instructions given by club officials.

Yes  No  My child may appear in photographs used only to promote the club publicly.

Yes  No  My child may appear in video footage and photos of rowing technique, to use as a training aid.

 I confirm that my child and I have read and understood the parent/guardian consent on this form and declare that I give my consent for the children named above to participate in club rowing and social activities.

**Parent /Guardian**

Signed: ………………………………………………………………………………………………………………………………

Date: ……………………………………………………………………………………….

Please print name: …………………………………………………………………………………………………………..

**Junior Rower**

Signed: ………………………………………………………………………………………………………………………………

Date: ……………………………………………………………………………………….

Please print name: …………………………………………………………………………………………………………..

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Please return completed forms and any cheques to:**

**Sue South, Membership Secretary   
Wheatly Farm, Parracombe, Barnstaple EX31 4QE**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**