



POOLE AMATEUR ROWING CLUB MEMBERSHIP APPLICATION FORM

www.poolerowingclub.org.uk

Name:

Home Phone:

Work Phone:

Mobile:

E-Mail:

Address:

Date Of Birth:

Type Of Membership:

Full:	£90.00	
Unemployed / Full Time Student	£40.00	
Social:	£10.00	

Have you rowed before, if so where?

Injuries Or Illness:(Rowing Applicants)

If You Currently Or Have Ever Suffered From Any Of The Following Please Indicate Below. This Information Is Confidential But Important To Ensure Your Well Being As An Athlete.

Asthma: Y/N Epilepsy: Y/N Diabetes: Y/N
Bronchitis: Y/N Blackouts: Y/N Ear Problems: Y/N

Muscular / Skeletal Injuries: e.g. Back Injury: Y/N

Are You Currently Taking Any Form Of Medication: Y/N

If You Answer Yes To Any Of The Above Please Give Details:

Can You Swim 100m In Sports Kit? Y/N

Qualifications: FIRST AIDER Y/N RYA NATIONAL POWERBOAT LEVEL 2 SAFETY BOAT CERT Y/N

Trade / Skills – your profession: _____ **What Skills can you help the club with?** _____

Signed:

Date: