

# Diss and District Cycling Club Membership Application Form 2018

Please complete in capitals. Cheques to be made payable to **Diss and District Cycling Club**.  
(Alternatively, Join/Renew online at [www.disscc.com](http://www.disscc.com))

**Senior: £20.00** (renewals **£15.00** if paid prior to 1<sup>st</sup> March). Five years for price of four: **£80** (renewals **£60** if paid prior to 1<sup>st</sup> March).

**Junior** (in primary/secondary education): **Free**.

**Family** (couples/guardians and any children in primary/secondary education): **£25** (renewals **£20** if paid prior to 1<sup>st</sup> of March). **Second Claim: £10**

**Name(s):** .....

..... **Dates of Birth:** .....

**Address:** .....

..... **Postcode:** .....

**Tel): Ho..... Mo..... Email** .....

**I.C.E Name & No:** ..... (In Case of Emergency)

**First-claim Diss CC member(s)?** Yes/No (Delete). If not, which Club? .....

**Cycling Interest - Road, TT, CX, MTB, Track, Audax, Sportive, BMX, Other (Circle)**

**Other (Please specify)**.....

**The Club organises a full programme of events throughout the year. It is a requirement of membership that ALL Senior members be available to assist at these events.**

**By joining the Club you are confirming your acceptance of this and your willingness to help.**

## **Declaration/Consent:**

Please confirm at which event(s) you are prepared to assist ie Time Trials, Road Race, Cyclocross, Club Runs, events such as Lotus Circuit Races, Old Bucks Cycling Fest, Diss Cyclathon, social events etc

I confirm my willingness to help throughout the year at:-

.....  
.....

.....or be generally available to help at request of the Club Committee.

Furthermore, I consent to all persons contained within this application being bound by and aware of such byelaws, constitution, child protection policy and regulations as in place during membership of Diss CC and as published at [www.disscc.com](http://www.disscc.com). (Hard copies available upon request).

**Signature:**..... **Date**.....

**Signature of parent or guardian for under 18s**..... **Date**.....

## **Please return form to:**

Mick Madgett  
Madgetts Cycles  
8-10 Shelfanger Road  
Diss  
Norfolk  
IP22 4EH

Simon Harrison  
Harrison Edge  
5 Castle Street  
Eye  
Suffolk  
IP23 7AN

**Only hand delivered applications to Madgetts Cycles please**