MEMBERSHIP FORM

Neath Archers

We are very pleased to welcome you to Neath Archers.

To ensure we have the correct contact details for you, please fill out this form. If you are under 18 please also ask your parents or carer to sign the form before it is returned. We will also use this information to ensure that you are kept informed about club events.

Name:

Address:

Date of birth:

Whilst it is not compulsory that this section is completed the following paragraph explains why it is important.

Gender:

Female

Male

Disability

The Disability Discrimination Act 1995 defines a disabled person as anyone with 'a physical or mental impairment, which has a substantial and long-term adverse effect on his or her ability to carry out normal day-to-day activities'. Do you consider yourself to have a disability? Yes No

If yes, what is the nature of your disability? Visual impairment Hearing impairment Physical disability Learning disability Multiple disability Other (please specify):

Medical information

Please detail below any important medical information that our coaches/junior coordinator should be aware of (e.g epilepsy, asthma, diabetes etc.)

Emergency contact details

To be completed by the parent/carer or Adult

Please insert the information below to indicate the person(s) who should contacted in event of an incident/accident.

Contact name

Emergency contact number

By returning this completed form, I agree to taking part in the activities of the club.

I understand in the event of injury or illness all reasonable steps will be taken to contact the emergency number provided.

Data Protection

I DO agree to my personal details being stored in compliance GDPR 2018 and that once I become a member of Neath Archers I will automatically become a member of Archery GB, Waleas Archery Association and Glamorgan Archery association and that only relevant personal information will be shared with these parties

Signed.....Date

Photographs and Publicity

I DO give permission for any photographs taken of myself during Neath Archer's events to be used on Neath Archer's Website or Neath archer's social media sites or any othe archery related sites.

Signed.....Date

Health & Safety

I have read and understood the Health and Safety Policy together with the Risk Assessment Statement of Neath Archers



MR / MRS / MISS / MSTR	
FULL NAME	
DATE OF BIRTH	
ADDRESS	
POST CODE	
MOBILE / PHONE NUMBER	
EMAIL ADDRESS	and the second
NEW MEMBERSHIP	
RENEWING MEMBERSHIP	
Senior 25+	5.
Senior 18-24	
Junior	
Archer with disabilities (all ages)	

When you become a member of or renew your membership with Neath Archers you will automatically be registered as a member of Archery GB and the relevant County and Region. We will provide Archery GB with your personal data which they will use to enable access to an online portal for you (<u>https://agb.sport80.com</u>) which, amongst other things, allows you to set and amend your privacy settings. If you have any questions about the continuing privacy of your personal data when it is shared with Archery GB, please contact <u>gdpr@archerygb.org</u>

Would you like to continue to hear from Archery GB about their latest news including their quarterly magazine, ways in which you can support them and membership benefits available? If so, please tick below to let them know how you would like to hear from them and confirm your contact details:

1.	Magazine	Yes	ſ	1	No	ſ	1
2.	Email Newsletter	Yes	ĩ	i	No	ĩ	i
3.	Membership benefits / offers by email	Yes	Ē	i	No	Ĩ	ī

They will keep your details safe, and you can unsubscribe or change your preferences at https://agb.sport80.com

SIGNED BY ARCHER..... DATE.....