

Strathclyde Park Rowing Club

Senior RowStart Registration Form - **2015** Personal Details:

Name:

D.O.B:

Address:

Post Code

Email: *(To / Blind Copy)

Phone:

Alternative Phone:

Person To Contact In An Emergency:

Name:

Relation:

(partner, friend, parent, guardian, colleague etc)

Contact Phone No.:

* Communication with members

We are constantly updating our records and we communicate with club members primarily via email and our website. If you are happy for this to continue, please delete To / Blind Copy as appropriate indicating that we can contact you by email and that you are happy for other RowStart and club members to see your chosen email address. If you wish to keep your email address private, you will be blind copied into all correspondence.

Declaration

I hereby confirm that I:

Can swim at least 100 metres (we will carry out a capsized drill and swim test at the earliest opportunity)

Understand that I should speak to my doctor if I am concerned about any aspect of my health with regard to undertaking physical activity.

Signed: _____

Date: _____

PTO

Methods of payment (please select)

Please secure payment of £50 to guarantee your place on the course..

1. Cheques should be made payable to 'Strathclyde Park Rowing Club'.
2. Alternatively, you can use online/direct banking. However, please ensure to reference the payment with your name so we know where the payment has come from.

Bank: Bank of Scotland, 32 Brandon Parade, Motherwell, ML1 1UW Sort Code: 80-09-15 Account no: 00240423

Please return this form with your cheque or reference to the bank to:

RowStart Secretary,

Strathclyde Park Rowing Club

Strathclyde Country Park, 366 Hamilton Road, Motherwell, ML1 3ED