

Essex & Suffolk Gliding Club

Application or Renewal of Membership 2013-2014

I hereby apply for membership of, or to continue membership of the Essex & Suffolk Gliding Club Limited (the Club).

Personal Details:

Name:		
Address: (inc. postcode)		
Occupation:	If retired please also state previous occupation	
Contact Details:		Home: Mobile: e-mail:
Date of Birth:		Membership Number:

Medical Details:

Medical details:	Details of any conditions or disabilities which may be relevant in emergency: (eg. Epilepsy, asthma, diabetes, medication, etc.)
G.P. Name:	Optional
Surgery:	
Telephone:	

Emergency Contact Details:

Name:	Relationship:	Telephone No(s):

Fees:

	Due	Paid
Membership Fee: Full, Social, Junior, Youth.		
Trailer rental:		
Caravan parking:		
All single seaters scheme:		
Wood single seaters scheme:		
S & G Subscription:		
TOTAL:		

Acceptance of Conditions (Tick Boxes as appropriate – See overleaf for details)

	Read and Accepted	Declined	Not Applicable
General Conditions and Mandatory Safety Rules:			
Data Protection:			
Medical Declaration (Pre-solo):			

Medical Declaration (Solo pilots):			
Parental Consent:			

Signature(s)

Applicant's Signature:		Date:
Parent's Signature, Name, Address and Telephone No.: (if Applicable)		Date:

CONDITIONS OF MEMBERSHIP.

General Conditions and Mandatory Safety Rules: In consideration of my being admitted to (or continuing) as a member of the club, I agree to be bound and observe the Mandatory Safety Rules and Medical Notes, Child Protection Rules and all other rules and regulations of the club and of the British Gliding Association. I also agree to consider any guidance and to follow any instructions that I may be given by flying instructors or other officials of the club and to take responsibility for my actions and those of any guests that I may bring to the gliding site.

Parental Consent: For all applicants under 18 years of age. I declare that I have read and understand this information given on this form and that I am the Parent or legal Guardian of the Applicant, who is a minor. I agree on my behalf and on behalf of the applicant to accept and be bound by the conditions detailed on this form. I am over 18 years of age. I agree to my son/daughter/child in my care taking part in the activities of the club.

Data Protection Declaration: I understand that my information will be used by the club for club purposes and to ensure that I am kept informed about club news and events. I understand that from time to time it is necessary for the club to share information about its membership with the British Gliding Association. More information about how we treat your personal information is set out in the Club's Data Protection Policy.

Medical Declaration (Pre Solo Pilots): When flying under instruction you will be doing so with a suitably qualified pilot. There are no specific medical requirements that individuals need to satisfy while flying under instruction. However please read the medical notes on the back of the "Mandatory Safety Notes" before agreeing to the following declaration. If you do not have a copy, ask for one.

Declaration: I declare that I will bring to the attention of my instructor, in confidence, any medical condition which could cause an adverse effect during flight. I am aware that it is my personal responsibility to ensure that if there is any doubt about my fitness to fly, I will not fly and will seek advice from my GP.

I understand that a formal medical declaration countersigned by my GP will be required before solo flight as set out in the BGA Laws and Rules Medical Standards.

Medical Declaration (Solo Pilots): I am a solo pilot and have submitted relevant medical paperwork, as per BGA rules, to the club.

Essex & Suffolk Gliding Club
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