



Nottingham City
Pétanque Club

Membership Application Form

Note:- Please note the details requested below will form the membership details for communication purposes ONLY and for the purposes of the Data Protection Act, this information will be owned by The Club. It will be used only for the purposes of the club and will not be shared with Third Parties for any reason. Individual records will be destroyed in the event of cessation of the membership of the Club by the named individual.

Type of annual Membership requested:- (Strike out those not applicable)

- a) **Full Member**
- c) **Student Member**
- d) **Junior Member** (Under the age of 18 years)
- e) **Life Member**

Name;

Address;

.....

Post Code;

Home Tel Mobile Tel

Email Address

My interest in petanque is;- a) As a leisure activity? (Family, friends, meeting people, etc)

or b) As a sports opportunity? (Team and possible league play)

Have you any Petanque playing experience?

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Are you already a member of the English Petanque Association? Yes/No

If Yes, please supply your EPA Membership Number.....

Please Sign;-

PARENTAL CONSENT: to be signed by a parent/guardian of a junior member. I agree to (Names) taking part in the general activities of the club, and I agree to accept the code of conduct for parents. To my knowledge the information above is correct, and in the event of any injury, I understand that all reasonable steps will be taken to contact me, and to deal with the situation appropriately. I agree that it is a parental responsibility for delivering and collecting their children from the club.

Parent/Guardian's Name Emergency Contact Number
Signature Date