

Application for Membership

Please complete clearly using block capitals

Title F	orenames		Surname	
Address				
Town		County	Postcode	
Date of Birth	Email Addre	ess		
Phone Number	er (Optional)			
Please read th	e following informatio	n carefully and marl	the boxes (x) to confirm your consent	
membership. O committee men your data can b As a BMC-affilia your membersh communicate w Profile' which, a about how the I	nly the Membership Seconders will have access to be found at http://colchestated club we will provide hip of the BMC including with you about your memumongst other things, all	cretary and President o a list of members' n sterclimbingclub.org.u e your name, contact o your combined liabili abership. The BMC wi lows you to set and a found at http://www.th	r communicating with you about your will be able to access your details, although a ames. More information about how we look a ak/privacy-policy. details and date of birth to the BMC to adminity insurance cover. The BMC will use your da ll contact you to invite you to create a 'Member mend your privacy settings. More information ebmc.co.uk/privacy. We will never share or set	ster ster ta to er
I wish to apply	for membership of Co	olchester Climbing (Club.	
I have read, understood and agree to be bound by the Club constitution and rules. http://colchesterclimbingclub.org.uk/constitution				
I agree to my information being processed as outlined above.				
I accept that Climbing, Hill Walking and Mountaineering are activities with a danger of personal injury or death. I am aware of and shall accept these risks and wish to participate in these activities voluntarily and shall be responsible for my own actions and involvement.				
I consent to Colchester Climbing Club posting photos of me on social media or the website.				
Membership T	ype: 🔲 Standard ((£30) ☐ Half Year		
Payment Meth	nod: 🔲 Cash	☐ Bank Tra	nsfer	
Signed			Date	