

# PADDLEPLUS ADULT/UNWAGED MEMBERSHIP FORM

- Adult membership fee is  Adult £35  Unwaged/student £25  
Please enclose payment with membership form
- Please ensure you have **read the PaddlePlus handbook** which contains important information
- **£5 discount is available for members of the BCU**

NAME
ADDRESS
POST CODE
TEL NUMBER
MOBILE
E MAIL

Please tick the boxes below which are relevant to you

I am a BCU member <b>(include number)</b>	<input type="checkbox"/>
I am water confident	<input type="checkbox"/>
I hold 1 Star/PaddlePower Passport	<input type="checkbox"/>
I hold 2 Star/PaddlePower Discover	<input type="checkbox"/>
I hold 3 Star	<input type="checkbox"/>
I hold 4 Star	<input type="checkbox"/>
Attended an FSRT safety course	<input type="checkbox"/>
Passed White Water Safety Test	<input type="checkbox"/>
Hold current 1 <sup>st</sup> Aid Certificate <b>(pass date)</b>	<input type="checkbox"/>

If you hold any current coaching qualifications please list them below


Please give details below of any medical condition that we should be aware of


Are you taking any medication that we need to be aware of? (please give details and dosage)


Name and Telephone number of Doctor

--

Name and Telephone number of person you wish us to use as contact **(ICE Number)**

--

## DECLARATION:

I have read the PaddlePlus handbook. Upon acceptance to PaddlePlus I understand that activities in Which I undertake are at my own risk. I confirm that I do not suffer from any medical condition that May render me unfit for strenuous exercise (if a medical condition exists it will not preclude me from me From membership/participation, but I must declare it above and consult a doctor if in any doubt.

Signature of member ..... Date .....

Information entered on database: Date:

Initial: