



Membership form - guest / temporary / Wed am

First name:	Middle initials:
Family name:	Category: Guest / temporary / Wed am (please delete all but one)
Address:	
Postcode:	Date of birth:
Home telephone no:	Mobile telephone no:
Email address:	

For all guest / temporary / Wed am applicants:

- I wish to row as a guest member for a single day or join Tyne Amateur Rowing Club on a temporary basis as specified above:
- I note there is a fee payable - £4.50 a session for 2018 – if rowing or using land equipment. Please ensure this reaches a club officer direct or via a club member.
- I agree to abide by the Conditions of Membership set out overleaf.
- I understand that rowing brings with it some risks and that I have a part to play in reducing risks to myself and to others.
- I confirm that I have completed the medical disclosure section overleaf
- I confirm that I am able to swim 100 metres and tread water for 2 minutes in light games clothes (*please delete if not applicable - we will talk to you about use of a life jacket if you are going on the water*).
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Signed:

Date:

Please return this form **signed on both sides** as a hard copy to: John Mulholland, Membership Secretary, Tyne Amateur Rowing Club, Water Row, Newburn, Newcastle upon Tyne NE15 8NL. Or you can scan and email to: membership@tynearc.com.

The information you provide will not be used for any purpose other than club administration unless you have agreed specifically otherwise; see www.tynerowingclub.org/pages/privacy_notice_272598.cfm.

Conditions of Membership

1. The Club is responsible for maintaining its premises and equipment in a safe condition and for ensuring that all boats comply with the current standards.
2. Members and guests are responsible for:
 - Familiarising themselves with any Rules and Codes of Conduct the Club may have in place and following these at all times.
 - Ensuring the safety of themselves and other water users by reading and adhering to the British Rowing *Row Safe* guidance, the Tyne Safety Code and the Club Safety Rules. *These are on display at the Club and are on the British Rowing or Club web sites.*
 - Declaring on their membership application form any medical condition which might affect their ability to train or to row or to take charge of a boat - see below.
 - Reporting any similar medical condition that may arise during the term of their membership to their coach, squad coordinator or the Secretary.
Should a relevant medical condition exist, this will not necessarily preclude you from participation but it must be declared for your own safety and that of others. If you are in any doubt, please consult your doctor.
 - Declaring on the application form that they can swim 100m and tread water for 2 minutes or (if unable to do so) ensuring they use a life jacket when on the river.
New members must attend a swim test and capsize and immersion drill at the first reasonable opportunity after joining. If there is any doubt about a member being able to swim the required distance, they will be asked to wear a life jacket.
3. Inexperienced members at any level must not use Club boats or other equipment unsupervised.
Advice will be given by Club coaches as to when members can progress to unsupervised activities. If in doubt, please ask.
4. If you own a boat and use it from Club premises, you are responsible for checking that your boat is in a usable and safe condition. Unless under the direct supervision of a Club coach, you are responsible for your own safety on the river.
You should ensure that you carry adequate insurance to cover the cost of any accident involving your own boat, including damage to the boat itself, damage to equipment belonging to others, injury to yourself and injury to others. British Rowing membership includes both civil liability (third party) cover and personal accident insurance - look on their web site for details - www.britishrowing.org.

Medical Declaration

We need to know if you have any medical condition that might affect your ability to train or to row or restrict you from taking charge of a boat. **Please delete either (a) or (b) below as applicable and sign:**

- (a) I have no such medical condition; or
(b) I have the following relevant medical condition:

Signed:

Date: