

# www.FoelDH.com

## FOELDH Mountain Bike Club Membership Form

Thanks for joining FoelDH. Once your application has been processed you will receive your membership card and a welcome pack. Visit the club website for details of your membership benefits, including discounts with local companies.

Please complete in full and return to **FoelDH, 16 Maes y Llan, Towyn, LL22 9JA**

### Member Details:

Name.....Telephone.....  
Address (Inc postcode).....  
.....  
Email..... Forum Name.....  
Date Of Birth.....Emergency Contact Name and Number.....  
.....Male/Female

**For informational purposes only, please indicate if you suffer from any medical conditions, Eg, Asthma, Diabetes etc.....**

### Membership Fee's.

**(PLEASE MAKE CHEQUES PAYABLE TO "FOELDH RIDERS")**

**All members £5**

**Membership is 12 months from the day we process your form.**

### Membership Agreement to Be Read and Understood

I assume full responsibility for the present application. I hereby undertake to respect the constitution, the rules of the club, the rules of the Welsh Cycling Federation and the laws of the land. I declare having read or having the opportunity to read such Constitutions or regulations. I will participate in club events in a loyal and sporting manner. I will submit to disciplinary measures taken against me. I understand and agree that I participate in events promoted under the clubs rules and regulations entirely at my own risk. I have considered the understanding of events. I am sufficient competent to assume full and entire responsibility for my own safety whilst I engage in activities involving FOELDH. I understand that riders over 16 are permitted to ride/ compete on the public highway and must assume full responsibility for their own safety in relation to other traffic. I understand further that all events involving travel on the open road must observe the law of the land relating to road travel. I agree that I shall participate in events with liability whatsoever on the part of the promoter, Welsh Cycling Union, The British Cycling Federation, FOELDH or any other organisation affiliated thereto or their officials or members in respect of and injury, loss or damage suffered by him/her, provided that this does not include the liability of any such party for death or personal injury arising from that party's negligence. I confirm that I do not have any disability or medical condition, physical or mental, which could affect my ability to ride safely. I understand that I must inform the general club secretary of FOELDH at once if I at any time become subject to any disability or medical condition, physical or mental, which could affect my ability to ride safely.

**Member Signature.....Date.....**

**Print**

**Name.....**

**Parent Consent to be Read and understood by parent/guardian of members under 18 years old**

I understand and agree that my son/daughter participates in events promoted under the club rules and regulations entirely at his/hers own risk I have considered and understand the nature of such events and have discussed them with my son/daughter. I am satisfied that my son/daughter I sufficiently competent to assume full and total responsibility for his/hers own safety whilst engaged in activities involving FOELDH

**Parent/Guardian Signature.....Date.....**

**Print Name.....**

Please tick here if you are NOT happy to receive emails regarding the club

Affiliated to the Welsh Cycling Union and supported by the FC Wales