

Print out, fill in and post with payment to the address below.

Personal Details

Title: _____ First Name: _____ Last Name: _____
Date of Birth: _____ Sex: M/F Email: _____
Home Telephone: _____ Mobile Telephone: _____
Address: _____
Postcode: _____

Association membership

BTF Number: _____ Registered as SYTri: Yes/No _____
British Cycling Number: _____ Registered as SYTri: Yes/No _____

Medical & Emergency (optional)

Medication/allergy information: _____
Emergency contact: _____ Relationship: _____
Emergency telephone: _____

Disclaimer/Legal (please read carefully)

Members train at coached sessions, non coached sessions and race for SYTri at their own risk. Members must be aware that, while every care is taken to minimize the risk of accidents, they accept responsibility for their own safety. They can in no way hold SYTri responsible for any injury or damage at any time Members are advised to take out their own insurance policy to cover them if not a member of the BTF or British Cycling. Members agree that as a member of SYTri they will not act in any way that will bring the Club into disrepute. Members contact details may be used by members of SYTri committee for internal communication purposes. These details will not be shared with any external third party. (Subject to the Data Protection Act).

Membership

I enclose a Cheque for £25.00* made payable to "SYTri" to the following address:
17 Grantley Avenue, Kingswood Oak, Shrewsbury SY3 5LA

Signed: _____
Date: _____

*membership is payable yearly and will be due from 31st January