

**APPLICATION FOR MEMBERSHIP**

Club Name: Uist Community Riding School (UCRS)  
 Club Address: East Camp, Balivanich, Isle of Benbecula, HS7 5LA

Please complete membership form and forward it to the attention of the Membership Secretary

Surname

First Name (s)

Address

Phone Number

Email Address  Please do not contact me by email

Type of Membership

Adult - £30 per year  Junior (Under 18) - £20 per year  Family - £60 per year  Corporate\* - £100 per year

**Member 1** Name  Date of Birth

Medical or Fitness Issues

**Member 2** Name  Date of Birth

Medical or Fitness Issues

**Member 3** Name  Date of Birth

Medical or Fitness Issues

**Member 4** Name  Date of Birth

Medical or Fitness Issues

Please add any additional information overleaf. Any medical details will be kept confidential, and the information shared only to UCRS employees on a strict, need-to-know basis. Please note if any individuals are not to have their photos taken. Please be aware that we may share photos on social media. **Please tick this box if you're happy for all members photos to be used in this way**  \*Corporate membership does not require named members. Instead, all members of the corporation will be eligible to reduced price rides on production of the assigned membership number.

**Emergency Information**

Emergency Contact Name  Relationship

Home phone number  Mobile

Doctor Information Name  Contact Number

Address

**Payment Details**

Please tick the box to specify which payment type has been used: Standing Order  BACS  Cheque

**Declaration**

To the best of my knowledge the information supplied on this form is absolute and complete as required by UCRS for the purposes of my, or associated others, membership. I will update UCRS if circumstances change, and take full responsibility for failing to update the information of any of the above members.

Signed \_\_\_\_\_ Name (Printed) \_\_\_\_\_ Date \_\_\_\_\_

**Standing Order Form. Please complete and send the following to your bank:**

To the Manager,

We hereby authorise and request you to debit my/our account

(Account Name)

Account Details Sort Code  Account Number

By (Amount)

Please take this initial amount out upon receipt of this letter, and thereafter on the 1st of April every year, until further notice.

And crediting  Uist Community Riding School, The Bank of Scotland, Balivanich, Isle of Benbecula, HS7 5LA

Sort Code  80—05—60 Account Number  00235269

Quoting Reference  (Your name)