

StudentActivities | Membership Form

Top Copy: Members Receipt, Middle Copy: For group records, Bottom Copy: Returned to ARC

Academic Year: Group Joined:

Members Details

Name: E-mail:
Student ID: Contact Number:
Date of Birth:

Medical Information

Do you have any medical conditions which may affect your ability to participate in Student Activities at Leeds University Union?

Experience

Do you have any previous relevant experiences in this activity? Please detail it below along with any qualifications you hold that you feel would be useful for the group (i.e. coaching qualifications, first aid certificate, e.t.c. - with expiry dates)

How would you describe your level of competence in this activity?

NOVICE

INTERMEDIATE

ADVANCED

Transport

Do you hold a UK driving license? YES NO
If yes, then when did you pass your driving test? Month: Year:
Do you own a car that you will be willing to use for group activities? YES NO

(Please bear in mind that addition to making sure your vehicle insurance company is aware that you will be using your vehicle for club use, there is a separate registration process you would need to complete before your car can be used for group activities)

I understand that it is my responsibility to:

- Inform the group committee of any medical condition or previous injury that may affect my ability to safely participate in any activity.
- Inform the group committee of any changes to the above information
- Recognise and accept the inherent risks associated within the activities I take part in
- Be responsible for my own actions and involvement in this activity
- To make my next of kin aware of my participation in this activity

Signed: Printed: Date:

Data Protection: The above information will only be used for the safe and effective management of Student Activities at LUU. Information will be stored and held both by the Union and the elected representatives of the group concerned. **THIS FORM IS YOUR RECEIPT: PLEASE KEEP IT IN A SAFE PLACE:** Membership refunds will only be considered up until three weeks from the date joining and only with this receipt. After this date, refunds will not be given.

COMMITTEE USE ONLY:

Membership Fee: [] Registration Fee: [] TOTAL RECEIVED: []

Received by: Date: