



Membership Contact Details

1) PERSONAL DETAILS

Name:

Date of Birth:

Contact details

Mobile Phone:

Email:

Contact person in emergency:

Name:

Mobile Phone:

Relationship:

Please tick which free Training Sessions you wish to attend:

- | | | |
|--------------------------|---------------------------|-------------------------|
| <input type="checkbox"/> | Over '60s session | - Monday 2pm |
| <input type="checkbox"/> | Evening session | - Monday 7:30 pm |
| <input type="checkbox"/> | Get Active session | - Friday 2pm |

- I consent to the club collecting, storing and processing the above personal data provided in this form in accordance with the club's data protection policy and privacy notice as set out on the club's website at <https://hollandsportsgetfitclub.teamer.net/teams/111728088-more-active-more-often/documents>
- I consent to receive communications from Holland Sports Get Fit Club
- I consent to the club photographing/videoing and agree to these photographs/videos being published to promote the club.

SIGNED (member): _____ DATE _____

PRINT NAME: _____