



CREWE VAGRANTS SPORTS CLUB LIMITED GYM MEMBERSHIP APPLICATION FORM

Full Name:

Date of Birth:

Parent / Guardian Name:
(if you are under 18 years old)

Address:

.....
.....

Post Code:

Email Address:

Telephone Number:

Special Requirements:
(disabilities, injuries, illnesses etc.)

.....
.....

Membership Rate:
(please circle all that apply)

Hockey Member / Cricket Member / Squash Member / C&N RUFC Member / New Vagrants Member

By signing this form, you are confirming that you have been instructed on the safe use of gym equipment and that you take full responsibility for use of our equipment. You understand that Crewe Vagrants Sports Club Limited accepts no responsibility for injuries incurred whilst using the gym. Any details held are for legal and membership administration and will not be passed on to any third parties. For any members under the age of 18, a parent, guardian or session coach must be present whilst using the gym. The equipment must be used under the guidelines issued by the governing body of fitness and strength training. Please sign below if you understand and agree with these terms of use.

Date of Application:

Member Signature:.....

Parent / Guardian Signature:.....
(if you are under 18 years old)