

Kendal Fellwalkers
APPLICATION FOR MEMBERSHIP

Name* _____

(* the name by which you would like to be known and under which you will be listed)

Address _____

_____ Postcode _____

E-mail address _____

Telephone no. _____ Mobile no. _____

I apply for membership of the club and enclose my subscription of £5.00 for the current calendar year.

I have read the Constitution and Rules, Safety Guidelines and Conduct of Club Walks documents published on the Club's website and I agree to be bound by them.

I recognise that hill walking and associated activities carry risks of personal injury or death. I am aware of and accept these risks. I wish to participate in the club's activities voluntarily and will be responsible for my own actions and safety.

(Signed) _____

(Date) _____

Please return this form and your cheque (payable to Kendal Fellwalkers) to the Secretary:

*Frank Jones, 36 Gillinggate, Kendal LA9 4JE
tel: (01539) 720021. e-mail: frankj100@btinternet.com*

In order to help in the running of the club the particulars on this form will be stored in an electronic retrieval system. The information will be incorporated in a list which is sent periodically by e-mail or post to all members. It will not be given, sold, hired or lent to any third party, except that it may be made available to the Club's insurers.
