

# Dunfermline Camera Club



## **Membership Application**

Name				
Address				
Postcode				
Home Phone				
Mobile Phone				
E-mail				
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Medical Information				
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Detail any medical or special needs condition, and information on any				
medication that may be required in case of emergency.				
Emergency Contacts				
1st Contact Name				
Relationship				
Address				
Home phone				
Mobile phone				
2 <sup>nd</sup> Contact Name				
Relationship				
Address				
Home phone				
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## **Dunfermline Camera Club**



### **Membership Application**

#### **Membership Fee**

Membership runs on a rolling year from the date of joining, adult membership costs £25 per year. We also offer a junior membership which is free of charge but all junior members must be accompanied by a fully paid adult member.

#### The Data Protection Act 1998

By completing this form you are agreeing for the information provided above to be held in a confidential manner for the period of your membership with Dunfermline Camera Club. The information will only be accessed by the Data Controller (club secretary) in response to any emergency situation arising relating to your health and/or safety.

At any time should your membership come to an end, the information provided will be destroyed in a confidential manner.

#### Liability

By signing this application you indicate that you understand that the club and its office bearers accept no responsibility for loss, damage, or injury caused by, or during attendance on, any of the organised club outings, except where such loss, damage or injury can be shown to result directly from the negligence of the organisers. You accept this for yourself and any family members on behalf of whom you are signing.

#### Insurance

The club has an extensive insurance policy to cover damage to personal equipment whilst on an official club outing. Although there is an excess of £300, which has to be paid prior to making any claim.

I have read and understood the statements above, and I understand and agree to adhere to the club's constitution.

Name :	Date:	Signature
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