

Membership Form

Peterhouse Boat Club

Peterhouse, Cambridge, CB2 1RD

Personal Details

First Name: Ramana	Surname: Kumar
Date of Birth: 08 02 1988 Y	Gender: Female: <input type="checkbox"/> Male: <input checked="" type="checkbox"/>
CRSid (Hermes Username): rk436	Term Time Address/Room: 1 North Terrace, Room 3
Mobile Telephone: 07902110683	

For New Members

Rowing Experience: Complete Novice: <input checked="" type="checkbox"/> Rowed Before: <input type="checkbox"/> Sculled Before: <input type="checkbox"/> Coxed Before: <input type="checkbox"/>	Previous club/crew if applicable:
Ambitions: I would like to: Row: <input checked="" type="checkbox"/> Cox: <input type="checkbox"/> (Men: <input type="checkbox"/> Women: <input type="checkbox"/> Either: <input type="checkbox"/>	

For Returning Members

Ambitions:	Row	Cox	Coach
1 st Boat:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Best Boat Possible:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 nd Boat:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 rd Boat or Lower:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social Rowing:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Learn To:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NB: Please check your profile is up to date at www.peterhousebc.org . This includes your ARA membership number and current points.			

Water Safety Declaration

By signing below I confirm that: I understand participation is undertaken at my own risk. I can swim at least 50 metres in light clothing. I do not suffer from any disability or medical condition which may render me unfit for strenuous exercise.* I have declared any such medical condition(s). I have read and understood the "Water Safety Guidelines" included with this form and agree to abide by the policies, codes and rules of the Peterhouse Boat Club, Cambridge University Combined Boat Clubs and the Amateur Rowing Association. I understand how to contact the Club's Water Safety Adviser and Captain for further water safety advice if necessary.	* Should such a medical condition exist, this will not necessarily preclude you from participation but it must be declared in the space below. Alternatively, if you wish the condition to remain confidential then a doctor's note confirming your fitness to participate is sufficient. Should you be in any doubt, advice should be sought from your doctor.
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Subscriptions

By signing below I confirm that: I understand the termly subscription is currently £22. I agree to this sum being charged to my College account.* I shall be liable for this sum once I have coxed, rowed or sculled at least three times during the term.	*Those members without a College account at Peterhouse may pay their subscription by cheque made payable to "Peterhouse Boat Club". If you will be paying by cheque please tick here: <input type="checkbox"/>
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Signature

I have read, I have understood and I agree to abide by the "Water Safety Declaration" and "Subscriptions" sections above.	
Signature:	Date: 28 October 2010

Instructions

Once this form has been completed you should: Detach and keep the information sheets included with this form. Return this page to the <i>Honorary Secretary</i> via the Peterhouse Boat Club pigeon hole located in the Peterhouse Porters' Lodge.
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