

Membership Form



To join British Orienteering either return this form to the National Office or join online at www.britishorienteering.org.uk

New National Member: If you have never been a member of British Orienteering and you join after the **1st September 2007** you will receive up to 16 months membership for the price of 12.

New Local Member: If you have not been a member of a club or British Orienteering during the last three years you will receive free membership until the 31st December 2008.

British Orienteering Level: (Please tick) National Local

Membership Grade: (Please tick)

Senior (over 21) Junior (under 21 on the 1st January 2008) Full Time Student (I.D. required)
Family (2 persons required, 1 adult min, 2 adults max) Associate

Personal Details of Members:

For Senior, Junior and Family membership only. Personal details are not required for Associate membership. Please give the forename or abbreviation by which you are most commonly known. **Gender and year of birth are essential to determine competition classes.**

	Initials	Forename	Surname (If different)	Gender	Year of Birth
1					
2					
3					
4					
5					
6					
7					

Address: (This address will be used for all mailings from British Orienteering).

	Postcode:
Telephone:	Mobile:
Email:	

Payment:

Either join and pay online at www.britishorienteering.org.uk or return this form with a cheque made payable to BRITISH ORIENTEERING. You may complete a Direct Debit mandate if you wish to pay your membership fee by Direct Debit in future.

Please send to: British Orienteering, 8a Stancliffe House, Whitworth Road, Darley Dale, Matlock, Derbyshire, DE4 2HJ

Club and Association Details: (Fees available on the website or by telephoning 01629 734042)

Club Name:	Association Name:	British Orienteering Fee £
Club Fee £	Association Fee £	Total Fee Payable £

PRIVACY POLICY: British Orienteering is committed to safeguarding the privacy of your information. By "your information" we mean any information about you, which you or third parties provide to us. This policy relates to the privacy of your information and can be found at www.britishorienteering.org.uk. The British Orienteering's Privacy Principles outline our commitment to the secure and responsible handling of information about our members.

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Equality Policy

British Orienteering aims to ensure that all people have a genuine and equal opportunity to participate in the sport of Orienteering, at all levels of performance and in all roles. In order to establish whether membership details reflect all sectors of the community, please can you complete the form below. This information will be treated as confidential and in a collated form the data will be used to provide information to Government agencies.

A White <input type="radio"/>	B Mixed <input type="radio"/>	C Asian or Asian British <input type="radio"/>
English <input type="radio"/> Irish <input type="radio"/> Scottish <input type="radio"/> Welsh <input type="radio"/> Other <input type="radio"/>	White & Black Caribbean <input type="radio"/> White & Black African <input type="radio"/> White & Asian <input type="radio"/> Other <input type="radio"/>	Indian <input type="radio"/> Pakistani <input type="radio"/> Bangladeshi <input type="radio"/> Other <input type="radio"/>
D Black or Black British <input type="radio"/>	E Chinese or Other Ethnic Group <input type="radio"/>	
Caribbean <input type="radio"/> African <input type="radio"/> Other <input type="radio"/>	Chinese <input type="radio"/> Other <input type="radio"/>	

What is your religion?

None
Christian *(including Church of England, Catholic, Protestant and all other Christian denominations)*
Buddhist
Hindu
Jewish
Muslim
Sikh

Any other religion *(please write in)*

Do not wish to disclose

Disability

The Discrimination Act 1995 defines a disabled person as anyone with a "physical or mental impairment that has a substantial and long term adverse effect upon his/her ability to carry out normal day to day activities". If you consider yourself to have a disability, please provide the nature of that disability below.

Do you consider yourself to have a disability?

Yes No

If you have indicated yes, please mark all the boxes that apply to you:

Visual impairment Hearing impairment
Physical impairment Learning disability/difficulty

Other? (please specify)