

# **TRI-LOGIC CORNWALL TRIATHLON CLUB**

## **MEMBERSHIP FORM**



|                |  |
|----------------|--|
| First name:    |  |
| Surname:       |  |
| Male/female    |  |
| Date of birth: |  |
| Address:       |  |
| Town:          |  |
| County:        |  |
| Postcode:      |  |
| Tel no:        |  |
| Work Tel:      |  |

We are affiliated to the **BTA**  
(British Triathlon) **RTTC**  
(Road Time Trial Council) &  
**UKA** (UK Athletics)

|         |  |
|---------|--|
| Mobile: |  |
| E-Mail: |  |

I'm interested in training with other people in the following events (please circle)

Swim

cycle

run

Please state here any medical conditions/ medication taken/allergies that we should be aware of (insanity doesn't count):

|   |     |    |
|---|-----|----|
| <b>I give permission for you to display my contact details on our membership list (for internal club use only)</b>                      | Yes | No |
| <b>I agree to the use of photographic images of the clubs activities for promotional and reporting purposes and use on the website.</b> | Yes | No |

|                 |  |
|-----------------|--|
| Date completed: |  |
| Signature:      |  |

Please return with the correct membership fee as described below (if unsure please contact Membership Secretary below):

Joining between 1 April and 30 September: £20 [£15 for 2<sup>nd</sup> claim]  
Joining between 1 October and 30 March: £10 [£7.50 for 2<sup>nd</sup> claim]

Please make cheques made payable to Tri-Logic Cornwall and send to postal address below:

Alison Galloway  
94 Meneage Street  
Helston  
TR13 8RF

Please contact us on e-mail: [trilogiccornwall@yahoo.co.uk](mailto:trilogiccornwall@yahoo.co.uk)