	Application / Renewal Form							
à								
ISLE OF PORTLAND	Address:							
CANOE CLUB	Postcode: Date of Birth:							
	Landline:							
Contact Numbers	Mobile:							
Email address:								
Emergency Contact Details		Name:						
(This contact will only be used in an emergency)			Number:					
Medical Conditions:								
British Canoeing Membership No: British Canoeing Expiry							•	
Kayaking Experience								
	Bri	itish	Cano	eing (	Qualific	ations		
Award Date Ach		ieved A			Award		Date Achieved	
2025/26 Mombor	chin					Full Year	October-March	
2025/26 Membership Subscription		Paddle UK (BC) membe			member	£20	£10	
(April 25-March 26)		Non member				£23	£13	
Upon acceptance into member own risk. I confirm that I do not exercise. Should a medical corbut it must be declared. Should Participants are responsible damage of property that may	t suffer from a ndition exist, t d you be in an for themselv	any dis this wo ny dou <b>/es. T</b>	sability ould no obt, adv he clul	or med t neces ice sho o acce	dical con ssarily p ould be s	dition which may rende reclude you from memb sought from your family	er me unfit for strenuous pership or participation, doctor.	
Signed						Date		

Or hand to a committee member at a club event and pay by cheque payable to Isle of Portland Canoe Club, or pay the committee member by cash (but this is the least preferred option).

Please either email form to treasurer@iopcc.org and pay by BACS Sort Code 30-99-56 A/C 02013775

Personal details provided on this application form will be stored electronically and may be shared with Paddle UK. The signing of this form will be taken as acknowledgement of this and permission to do so. All information provided will be used solely for the running of the Isle of Portland Canoe Club and will not be disclosed to any third party unless necessary for the running of the club or if compelled to by law.