

Payment Options:

I understand that all fees made by the club are due immediately. I will ensure that my account is in credit or a zero balance at all times regardless of the payment option chosen.

I wish to pay all fees due by Cash/Cheque

I wish to pay membership fees (and a contribution to my flying fees) by Standing Order. I have completed the additional forms 'Standing Order Agreement' and 'Standing Order Mandate' which are both enclosed with this form.

I have elected to pay £..... on the 1st of every month starting/...../.....
(subject to a minimum amount as stated by the Glidex system)

I have paid £..... being 3 months advance subscriptions
(subject to a minimum amount as stated by the Glidex system)

The Small Print (Terms and Conditions):

- 1 Because of the design of our aircraft we can only fly you if you:
 - i) are between 145cm and 193cm tall (4' 9" to 6' 4")
 - ii) weigh between 45kg and 102kg (7 to 16 stone)
- 2 We cannot accept anyone aged 12 or less for a flight of any kind. The responsible guardian of any young person (aged 17 or under) must be present at their first flight and sign the declaration overleaf. Subsequently we will only accept anyone aged 13 or 14 if their responsible guardian is present on the airfield at all times. Stratford on Avon Gliding Club operates a Child Protection Policy.
- 3 Should you suffer from any form of disability then you should make it known. Whilst we do everything possible to ensure that people with disabilities can discover the joys of gliding, there are unfortunately some conditions that would jeopardise the safety of yourself and others.
- 4 Stratford on Avon Gliding Club reserve the right to refuse to allow anyone to fly under the following conditions:
 - i) The person is under the influence of alcohol or drugs.
 - ii) The person is suspected to be under the influence of alcohol and refuses a breathalyser test.
 - iii) Any other condition that in the judgement of the Duty Instructor would jeopardise the safety of the instructor or any other person at the airfield.
 - iv) The person does not comply with items 1, 2 or 3 of these conditions.The decision of the Duty Instructor is final.
- 5 All flights are subject to availability on the day.
- 6 Stratford on Avon Gliding Club cannot accept liability for any damage to vehicles or property belonging to Club Members or members of the public. Gliding is considered to be a dangerous aviation activity - should you fly at Stratford on Avon Gliding Club you do so entirely at your own risk.



STRATFORD-ON-AVON GLIDING CLUB LTD

FULL MEMBERSHIP APPLICATION AND INDEMNITY FORM

Please read this form in its entirety before signing the declaration.
If you are unsure as to the meaning of any part of this form please ask.

For Club Use:

(To be completed by the SOAGC witness and retained by the Club)

Date:

Name of Applicant:

Membership Number:

Membership Valid Until:

Payment Received:

New Member Pack Issued:

Membership Card Issued:

Your Details:

Please use block capitals throughout.
 Details are treated as confidential and will be held on a computer for Club purposes only

Have you visited Stratford On Avon Gliding Club before? Yes / No

Title: Mr / Mrs / Ms / Miss / Other (please specify)

Full initials:

Preferred Forename:

Surname:

Address:

City:

County:

Postcode:

Country (if not UK):

Date of Birth:

Email Address:

Occupation:

Telephone: Home / Mobile (please indicate)

Emergency Contact:

Membership Type:

Full Flying Member

Junior Member (Supply educational details overleaf)

Associate Member (Flying limited to six days per membership year)

Other:

Declaration to be read and signed by the Applicant:

I hereby apply for membership of the Stratford-on-Avon Gliding Club and agree to be bound by the Rules and Regulations of the Club. I exonerate the said Club and its members and servants and agents from all liability which may arise in respect of any loss or damage to my property or in respect of any injury, fatal or otherwise, which I may suffer while I am a member of the Club. I undertake to make no claim against the Club or its members or servants or agents notwithstanding that such loss or damage or injury was caused or occasioned directly or indirectly by the act of neglect or default of the Club or its members or servants or agents.

I hereby declare that I do not suffer from epilepsy or from sudden attacks of fainting or giddiness or from any other disability, mental or physical, which would be likely to result in the flying of a glider by me being a source of danger to myself or to others, and I understand that it is my responsibility to inform the Club of any change occurring which would affect this declaration of fitness.

I understand that gliding is considered a dangerous activity sport and that I fly at my own risk.

This application is subject to approval. A membership card will be issued to confirm this approval. Meanwhile, the applicant is deemed to be a temporary member of the Club.

Signature of Applicant:

Date:

Name of SOAGC Witness:

Signature of SOAGC Witness:

Declaration to be signed when the Applicant is under 18 years of age:

I, as lawful parent or guardian of the applicant, give my consent to them partaking in all Club activities including flying in Gliders and hereby agree to be bound by the declaration as stated above. I have read and am satisfied with the Club's Child Protection Policy.

Signature of Guardian:

Relationship:

Name and Full Address:

(FULL NAME AND ADDRESS, BLOCK CAPITALS PLEASE)

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