Linlithgow Athletic Club



Please read the notes below regarding general points about the club and then read carefully and fill in the accompanying forms. Please keep this sheet for reference.

- Competing Club Membership costs £50 and includes membership of Scottish Athletics. A Scottish athletics number will be allocated by Scottish Athletics and should be used on entry to competition for discounted entry.
 Please note that this fee is reduced to: £21 per year for age 18-21 £42 per year for age 65 upwards
- 2 Non-Competing Club Membership is available at £27 and does not include membership of Scottish Athletics, associated discounts on race entry fees or London marathon club entry.
- ³ Club Membership costs may have to increase where Scottish Athletics affiliation fees are increased.
- Payment can be made directly to the club account, using your name as a reference.
 Sort-code: 83-15-24
 Account No: 00679872
 Account Name: Linlithgow Athletic Club

Membership Application Form

| Membership Application Form | | | UNLITHGO 4 |
|--|---|--|---------------------|
| Name | | | |
| Mobile phone | | | ALETIC CLUR |
| | | | |
| Post Code | | | |
| Email | | | |
| Date of Birth | | | |
| Existing SAL Number | (if any) | | |
| - | ow will be your First Claim Club te primarily for Linlithgow) | | |
| Name of first claim of | lub (if any) | | |
| Name of previous cl | ub (if any) | | |
| <u>Type of Membershir</u> (tick as appropriate) | 2 | | |
| Senior (age 21 - 64) | Full Membership £50 | Veteran (65 and over) £4 | 2 |
| Senior (age 18 - 20) | Full Membership £21 | Non-competing £2 | .7 |
| Gender: Male | Female | Non-binary | |
| Do you consider yourse | If to have a disability or impairmen | nt? Yes / No | |
| time to time. Ye | our signature will be regarded as appro | give on this form & athletes' photos may oval of this, unless you notify us in writing ception of ScottishAthletics and for entr | g of any objection. |
| | have read and agree to respect the val ne Club" section on our website | lues and policies and abide by the code o | of conduct shown |
| Signed by Applicant | | Date | |
| Please return as sca | nned document or photo by ema | il to LinlithgowACMembership@c | outlook.com |
| or as hard copy to: | Neil Anderson 27 Braehead Park, Linlithgow EH49 6EJ | | |
| | | Date received | |