**PLEASE PRINT ALL DETAILS CLEARLY OR YOU MAY NOT RECEIVE NEWSLETTERS**

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| **Name:** |  | | | | | | | | | | | | | | | | **Age (if under 18 on 1st January):** | | | | | |  | | | | | | | | | | |
| **Address:** |  | | | | | | | | | | | | | | | | **Postcode:** | | | | | |  | | | | | | | | | | |
| **Mobile:** | | | | | |  | | | | | | | | | | |
| **Telephone:** |  | | | | | | | | | | | | | | | | **Referred By:** | | | | | |  | | | | | | | | | | |
| **Email Address:** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |
| **Emergency Contact Name:** |  | | | | | | | | | | | | | | | **Emergency Contact Number:** | | | | | | |  | | | | | | | | | | |
| **Subscription**  **\*\*NEW OFFER\*\* Refer a friend and if they join you will receive a £5 Voucher (1 for every friend referred) to use against your entries for EDRC Events! Subject to the fact that the referred person is not living at the same address as the referee and/or that they have not been a member in the previous 12 months. Also excludes free junior membership.**  **I enclose my subscription for £20.00. Subsequent family members living at the same address should pay £15.00 per member. Cheques payable to EDRC & must not be post dated. You could also make cash payments or use BACS payment. Please quote your name & membership as reference. Bank: HSBC Sort: 40-20-39 Acc: 30333697**  **If using BACS payment please remember to still post or email to** [**edrc@hotmail.co.uk**](mailto:edrc@hotmail.co.uk) **a copy of your completed membership form. If you don’t, you will not be put on the membership list or receive any newsletters. You are not a 2020 member until payment & completed form have been received. An acknowledgment will be sent via email to confirm your membership. Please be patient when waiting for this as memberships are processed 2 or 3 times a week & not daily.**  **Please tick this box if you agree to having photographs taken at EDRC events that may be used by EDRC on our website and social media pages. You must tick this box to OPT IN**  **I have read & I agree to abide by EDRC rules:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Signed:** |  | | | | | | | | | | | | | | | | **Date:** | | | | | |  | | | | | | | | | | |
| **Name, signature & contact telephone no of Parent or Guardian of junior members under 17 yrs. PLEASE PRINT CLEARLY** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Name:** |  | | | | | | | | | | | | | | | | **Contact Number:** | | | | | |  | | | | | | | | | | |
| **Signature:** |  | | | | | | | | | | | | | | | |  | | | | | |  | | | | | | | | | | |
| **Please post your completed form to: EDRC c/o Red House Cornley Road Misterton Doncaster DN10 4AY**  **Or email completed form to:** [**edrc@hotmail.co.uk**](mailto:edrc@hotmail.co.uk) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |