

### Membership Application Form for Canons Sports Centre

If you have any questions about this form or how we use your personal information please read the attached *Key Privacy Information for all Users of Canons Sports Centre* or contact the Sports Centre Manager for more information on CanonsSportsCentre@nlcs.org.uk or by telephone on 020 8951 5402.

Membership Type:									
🗆 Public			□ Other	If NLCS Daughte	If NLCS Daughter's Form:				
Membersh	ip Category:	:							
□ Sports Centre		□ Swimming Only		Dry Facilities					
Who will be	covered?								
🗆 Individual	□ Joint	Child	□ Student	□ Family					
Your Detai	ls:								
Title:									
Your Name (First Name & Surname):									
Date of Birth (if you believe that you may qualify for student/young person discount):									
Full Postal Address:									
Email Address:									
Telephone / Mobile number:									
If applying for additional family members or please give details below:									
First Name / S	Surname			Male/Female	Date of Birth:				

# If any members have any medical conditions / illnesses that our staff should be made aware of please state below:



#### **Method of Payment**

□ Annual Payment

□ Monthly Direct Debit (Please complete separate Direct Debit mandate form)

#### **Consent for Canons Sports Centre to Hold and Use Your Personal Data**

Canons Sports Centre is committed to protecting your personal data and complying with all UK data protection legislation.

To ensure that we can properly support you when using Canons, we need to hold personal data about you and your children (if they use the facilities at Canons). We may need to be able to contact you by email to let you know of changes to the schedules or by telephone in an emergency.

## Please indicate if you are happy for Canons to hold and use your personal data as outlined above and in accordance with the attached *Key Privacy Information for all Users of Canons Sports Centre*:

- □ **Yes**, I am happy for Canons to hold and use my personal data in accordance with its Data Protection policy and Users' Privacy Notice.
- □ No, I do not want Canons to hold and use my personal data. I accept that I <u>will not</u> be able to use the Canons Sports Centre.

#### Agreement to observe the attached Rules and Regulations of the Sports Centre:

It is important that **all** Canons members abide by our rules and regulations to ensure their safety (and that of other members) and so that all members may all enjoy their time at Canons.

- □ I (and my family) have read, understand and agree to observe the Rules and Regulations of the Sports Centre.
- □ I understand that Direct Debit payments will continue until I cancel or suspend them. I also note that I must provide at least one full months' notice of cancellation or suspension in writing to the Manager.

Signature:	Date:				
OFFICE USE ONLY:					
Receipt Number:	Date:		Fee:		
Issue Date:	Issued By:				
Membership Numbers: 1	_2	_3	4	5	
Issue Date:	Issued By:			5	