Membership Form 2024-2025



Please complete ALL details in BLOCK CAPITALS and return with your subscription (see "Section E") to: Jenny Dowling, Manx Harriers Membership Secretary, 2 Ballabridson Park, Ballasalla, Isle of Man, IM9 2ES

When you become a member of or renew your Membership with Manx Harriers you will automatically be registered as a member of England Athletics We will provide England Athletics with your personal data which they will use to enable access to an online portal for you (called MyAthletics)

England Athletics will contact you to invite you to sign into and update your MyAthletics portal (which, amongst other things, allows you to set and amend your privacy settings). If you have any questions about the continuing privacy of your personal data when it is shared with England Athletics, please contact dataprotection@englandathletics.org

		ration		
First Name		Surname		Male/Female (at B
Address				
			Post Code	
Telephone		Mobile		
E-Mail				
School/College/U	niversity (If still in Fu	ll Time Education)		
Date of Birth (DD/	/MM/YYYY)		School Year	
s Manx Harriers y	our First Claim Club	? Yes/ No If not	who is	
Please circle ALL t	he disciplines in whic	ch you expect to par	ticipate.	
Track and Field	Race Walking	Road Running	Cross Country	Fell and Hill
	ny important medical info betes, allergies etc.) Plea			· =
pehave in the manner from sharing it for cor	pleted form, I am willing r befitting a Manx Harriei mpetition purposes e.g. E	rs athlete. I also realise I		es and to agree to always my data confidential, apart
Signature				
	ency Contact Details tails of the persons v		cted in the event of	an incident/accident.
lease provide de			cted in the event of	an incident/accident.
Please provide de Name/No.			cted in the event of	an incident/accident.
Please provide de Name/No. Name/No t may be essential at obtain urgent treatme		vho should be conta	alf of the Club to have the	e necessary authority to sign below to give your
Please provide de Name/No. Name/No t may be essential at obtain urgent treatme	tails of the persons v	vho should be conta	alf of the Club to have the	e necessary authority to sign below to give your

Level	Lovel
Levei	Level
Event(s)	Description
Section D - Parent/Guardiar Age)	Details & Declaration (required for all Members under 16 years of
First Name	Surname
Address	
	Post Code
Telephone	Mobile
Fmail	

Officials Qualifications

Manx Harriers is run entirely by volunteers, and we rely on members and their families to help out at Club Events for a few hours each year. Please tick areas with which you would be interested in helping. The relevant Club representative will then contact you to see at which events you would be able to help. If there is a specific area of expertise that you feel you can bring to Manx Harriers, please indicate below.

Helping at Athletics Meetings	Assisting Training	Supervision of Athletes	
Refreshment Area	Fund raising	Admin/Helper	
Track judge	Field judge	Timekeeper	
Starter/Marksman	Committee post	Social Media/Website Help	

By returning this completed form, I agree:

Section C - Coaching Qualifications

- To the Member named in "Section A" taking part in the activities of Manx Harriers. For members Under 7, Under 9 or Under 11, registering for the first time, I confirm that they are in good health, and I consider them capable of competing in athletics.
- That I have read and agree to abide by the Club Code of Conduct whenever I am present at Club 2. activities or competition.
- 3. To helping with at least one Manx Harriers event per year.

Signature Print Name

SECTION E Membership Fees (Age as at 31st August 2024

Category	Club Fees	EA Affiliation	Total
Under 7s, 9s and 11s -1st/2nd Claim	14	0	14
Under 13s and Under 15s	25	19	44
Under 17s and Up in Full Time Education	30	19	49
Seniors Under 17 and Up	41	19	60
Family	65	19*	65 + *
Non Resident	20	19	39
Social	20	0	20
* Please add £19 EA Affiliation for each athl	ete in Year 6 a	nd above on 31st August 2024	