



# DARTMOOR GLIDING SOCIETY

## JUNIOR MEMBERSHIP APPLICATION FORM

To ensure we have the correct contact details for you, please fill out this form and hand to the Log-Keeper on any flying day, any Member or by post to DGS, Burnford Common, Brentor, Tavistock, PL19 0LB.

If you are under 18 please also ask your parents or guardian to sign the form before it is returned. We will also use this information to ensure that you are kept informed about club events.

### Personal details

Name:

Address:

Postcode:

Home telephone number:

Mobile:

Email:

Date of birth:

### Sporting information

Have you flown a glider before? Yes  No

If yes, where have you flown: (please indicate below)

Club

How much (please specify):

No. of flights:

Hours PIC:

Hours PUI:



# DARTMOOR GLIDING SOCIETY

Junior Member's name \_\_\_\_\_

*(NB this page will be copied and placed in the Club's emergency response file)*

## Medical information

Please detail below any important medical information that our coaches/junior coordinator should be aware of (eg epilepsy, asthma, diabetes etc.)

## Disability

The Disability Discrimination Act 1995 defines a disabled person as anyone with 'a physical or mental impairment, which has a substantial and long-term adverse effect on his or her ability to carry out normal day-to-day activities'.

Do you consider yourself to have a disability?      Yes       No

If yes, what is the nature of your disability?

Visual impairment

Hearing impairment

Physical disability

Learning disability

Multiple disability

Other (please specify):



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**Junior Member's name** \_\_\_\_\_

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## Emergency contact details

To be completed by the parent/guardian

Please insert the information below to indicate the person(s) who should be contacted in event of an incident/accident.

Please supply sufficient details for us to be able to contact you in the event of an emergency. Please note that you will need to ensure we are kept informed of any changes to these details.

Contact name(s) e.g. parent/guardian:

Emergency contact number(s):

By returning this completed form, I agree to my son / daughter / child in my care\* taking part in the activities of the club. (\* Please delete as necessary)

I understand that I will be kept informed of these activities – for example timing and transport details.

I understand that in the event of injury or illness all reasonable steps will be taken to contact me, and to deal with that injury/illness appropriately.

I have read and understood the notices given in this application form

Name of parent/guardian:	
Signature of parent/guardian:	Date:

## Notices:

1. By making this application the applicant is granting an indemnity to the Dartmoor Gliding Society against all claims of damages resulting from death, injury or loss or damage to personal effects as far as permitted under English Law.
2. Whilst Dartmoor Gliding Society obtains limited insurance cover for Members and visitors whilst using Company Facilities, Members should satisfy themselves that the cover provided is adequate for their needs.
3. In accordance with Art. 21 of the Articles of Association, you may elect for notices to be sent to you by Post [ ] or email [ ] (Tick one only)
4. Pilots wishing to fly solo or exercise other privileges must comply with medical certification requirements of BGA/EASA as appropriate and submit a DGS Medical Declaration Form.
5. Each Member has a duty to comply with the by-laws and operating procedures and rules issued by the Dartmoor Gliding Society.



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**Junior Member's name** \_\_\_\_\_

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## **Photography and Publicity**

For the purposes of promoting the sport of gliding, the Society uses a number of means to publicise its activities including social media, a blog on its website and general publicity material. From time to time inputs to these media may include photographs of your child/child in care to be used for this purpose. Please indicate below if you do or do not wish for any photograph or photographs to be used in this way.

I do\*/ do not\* object to the use of photographs used for this purpose (*\*delete as necessary*)

Name of parent/guardian:	
Signature of parent/guardian:	Date:



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Whilst it is not compulsory that the following section is completed this note explains why it is important to us.

Sport can and does play a major role in promoting inclusion of all groups in society. However, inequalities have traditionally existed within sport, particularly in relation to gender, race and disability. Sport England is committed to promoting and developing sports equity, which is about fairness in sport, equality of access, recognising inequalities and taking steps to address them. By monitoring the profile of young people in sports clubs, national governing bodies of sport and Sport England can identify any issues relating to under-representation of different groups and can together develop strategies to ensure all young people have an opportunity in the future development and progress in sport.

## Ethnicity

In order to help the club monitor its membership please will you tick one of the following boxes to identify your ethnic group/origin?

- A White   
British  Irish

Any other white background (please specify):

- B Mixed   
White & Black Caribbean  White & Asian   
White & Black African

Any other mixed background (please specify):

- C Asian or Asian British  Pakistani   
Indian  Bangladesh

Any other Asian background (please specify):

- D Black or Black British   
Caribbean   
African

Any other Black background (please specify):

- E Chinese or other ethnic group   
Chinese

Any other (please specify):