

Solihull Cycling Club

Application for Membership of Solihull Cycling Club

Has any personal information changed since last year? Yes / No (Deleted as Applicable)

Surname:	First Name(s):						
Address:	l						
Post Code:	Telephone: Mobile:						
Emails							
Email:	If you do not wish us to use your email address for club communications please indicate here.						
Date of Birth:							
Membership Category		(Tick which box is app	oropriate)				
New Members or Lapsed Members not paid	by 28 th FEB	Annual Fee	а				
Adult	<i>y</i>	£30					
Family (at same address)		£42					
Social/ under 18 / Old Sols		£19					
Existing Members		Annual Fee	а				
Adult		£25					
Family (at same address)		£37					
Social/ under 18 / Old Sols		£14					
Tudor Grange Track Fees		Number of riders	а				
£40 per member who will take part in any coached sessions at	G track during the year						
If Direct Debit form is received before 1 st Dec ,collection from bank will be 1 st Jan							
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If Direct Debit form is received before 1 st Family/Couple's membership – Name							
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Family/Couple's membership –		tes of Birth					
Family/Couple's membership – Name	please provide names and Da	tes of Birth D.O.B					
Family/Couple's membership – Name Please detail overleaf any important personal disability / med	please provide names and Da	tes of Birth D.O.B	be				
Family/Couple's membership – Name	please provide names and Da	tes of Birth D.O.B	be				
Family/Couple's membership – Name Please detail overleaf any important personal disability / med	please provide names and Da	tes of Birth D.O.B thes/run leaders should leaders	be				
Please detail overleaf any important personal disability / medaware of (e.g. Asthma, Diabetes, Epilepsy) As parent/guardian I give permission for my son/daug	lical condition which the coad	tes of Birth D.O.B hes/run leaders should l	be				
Family/Couple's membership – Name Please detail overleaf any important personal disability / medaware of (e.g. Asthma, Diabetes, Epilepsy)	please provide names and Da	tes of Birth D.O.B hes/run leaders should l	be				
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Please detail overleaf any important personal disability / medaware of (e.g. Asthma, Diabetes, Epilepsy) As parent/guardian I give permission for my son/daug *Please tick *Coached and Non-Coached riding Signature: I wish to apply for membership of Solihull Cycling Club and have real insure myself with 3 rd Party insurance. We recommend CTC, BC and	please provide names and Da lical condition which the coac there to participate in all Soliho *Over 13 can be unacco Date:	thes of Birth D.O.B Thes/run leaders should leaders should leaders companied					

Payment is by cheque (payable to Solihull Cycling Club) or Direct Debit Completed forms should be sent to:-

Pete James, Membership Secretary, 65 Hazelhurst Road, Kings Heath, B14 6AB

BACS payment is available, please email membership@solihull.org.uk and indicate you are paying by BACS

Sort Code 09-01-54 Account No 44 0334 83





Instruction to your Bank or Building Society to pay by Direct Debit

Please fill in the whole form using a ballpoint pen and send it to: Service User Number

Please fill in the whole form using a ballpoint pen and send it to:	Service User Number						
Solihull Cycling Club 65 Hazelhurst Road	2	7	5	0	3	2	
Kings Heath Birmingham B14 6AB	Dear Co		lease Com				
	Address:	<u> </u>				45	
Name(s) of Account Holder(s)	Postcode	:					
Bank or Building Society account number	Tel: Email:						
Branch Sort Code	Please pay	FastPay Li		ull Cycling	Club Direct	Debits from	
Name and full postal address of your Bank or Building Society	safeguards 1 understa	s assured b nd that thi	ed in this y the Direct is instruction and, i	t Debit Gua on may rem	rantee. ain with F	astPay Ltd	
To The Manager: Bank/Building Society	Signature		3ank/Buildir	ng Society.			
Address:							
Postcode	Date						
Reference Number	Banks and		cieties may n or some type			structions	

This Guarantee should be detached and retained by the payer.

The Direct Debit Guarantee



- This Guarantee is offered by all Banks and Building Societies that accept instructions to pay Direct Debits.
- If there are any changes to the amount, date or frequency of your Direct Debit, FastPay Ltd re Solihull Cycling Club will notify you five working days in advance of your account being debited or as otherwise agreed. If you request FastPay Ltd re Solihull Cycling Club to collect a payment, confirmation of the amount and date will be given to you at the time of the request.
- If an error is made in the payment of your Direct Debit by FastPay Ltd Re Solihull Cycling Club or your Bank or Building Society, you are entitled to a full and immediate refund of the amount paid from your bank or building society.
 - If you receive a refund you are not entitled to, you must pay it back when FastPay Ltd re Solihuil Cycling Club asks you to.
- You can cancel a Direct Debit at any time by simply contacting your Bank or Building Society. Written confirmation may be required. Please also notify us.