

 **Tarka Storm RL**

 Tarka Storm Rugby League

**Membership Package**

Contact Details

|  |  |
| --- | --- |
| First Name: |  |
| Last Name: |  |
| Address: |  |
|
| Postcode: |  |
| Telephone Number: |  |
| Email: |  |
| Date of Birth: |  |

Emergency Contact Details

|  |  |
| --- | --- |
| First Name: |  |
| Last Name: |  |
| Address: |  |
|
| Postcode: |  |
| Telephone Number: |  |
| GP Practice: |  |

Existing Medical Condition(s)

|  |  |
| --- | --- |
| Yes/No |  |
| If yes please list: |  |
|

Any Drug Allergy

|  |  |
| --- | --- |
| Yes/No |  |
| If yes please list: |  |
|

List all Medications you are taking regularly

|  |  |
| --- | --- |
| Yes/No |  |
| If yes please list: |  |
|

List History of past injuries eg. Dislocated shoulder

|  |  |
| --- | --- |
| Yes/No |  |
| If yes please list: |  |
|

**Please choose your membership package:**

Bronze Package £30

Silver Package £40

Gold Package £50

Titanium Package £60

**Payment:**

Basc

Sumup

Cash

………………………………………………………………………………………….

**Receipt:**

Bronze Package £30

Silver Package £40

Gold Package £50

Titanium Package £60

**Payment:**

Basc

Sumup

Cash

Received………………………….. Date…………………

I/We agree to abide by the rules and policies of the club, (a copy of which can be supplied).