# SHETLAND FENCING CLUB

Junior (under 18) MEMBERSHIP FORM

SEASON 2025/26



## Welcome to Shetland Fencing Club. The club provides equipment and coaching for anyone wishing to learn fencing from approx. age 7 upwards.

**Regular News will be sent to the email address you supply. Our website provides all up-to-date information and dates of fencing sessions etc.** [**www.shetlandfencingclub,co.uk**](http://www.shetlandfencingclub,co.uk)

**Please contact us with any queries (see below).**

**Please complete the form below**

|  |
| --- |
| Fencer details |
| **First Name** |  | **Surname** |  |
| **Date of Birth** **(DD/MM/YY)** |  |  |  | **School** |  |
| **Does your child do any other sports? Is so which ones?** |  |

|  |
| --- |
| **Parent / Carer details and emergency contact details** |
| **First Name** |  | **Surname** |  |
| **Relationship to fencer** |  |
| **Address** |  |  |
|  |  |
| **postcode** |  |
| **Telephone**  |  | **Mobile**  |  |
| **Email Address** |  |
| Email and our club website will be used for club news, changes to dates, arranging meetings and events etc. We ask you to check these weekly for any news or changes/ cancellation of dates etc. |

|  |
| --- |
| **We will use the above details as your emergency contact. If you wish to provide different or additional emergency contact details please provide them below** |
| Name: |  | Contact: |  |

|  |
| --- |
| Medical Conditions |
| Please let us know of any medical history e.g. allergies, diabetes which may affect activities. The information held in this enrolment form will only be shared with the volunteers and helpers who require to know this information to ensure the safety of your child. |
|  |

|  |
| --- |
| It may be essential at some time for authorised persons acting on behalf of the club to have the necessary authority to obtain urgent treatment, which may be required whilst at representative club competition or training. Please tick the box below to give your consent to emergency treatment being given to you, or the named fencer on this form if under 18, by trained personnel.  |
| Yes (insert x) |  |  |

|  |
| --- |
| **Photography** |
| From time to time photographs or video images may be taken (only by persons authorised by the club) to use for training purposes, publicity on our website, newspaper articles etc. according to national guidelines. Photos are not posted by the club on social media. |
| Please insert x to consent or not to such photographs | Yes |  | No |  |

|  |
| --- |
| **Club Fees** |
| To be able to try fencing for a trial period, before you need full membership, we have an introductory period of 4 weeks for £20. This can be paid at the club or preferably by BACS see below.This includes use of club kit, court hire and coaching. After this, membership requires a Standing Order Mandate to be completed for £20 per month, and membership of British Fencing.Please refer to website, ‘getting started’ - ‘costs’ page if you are applying for help from the club with fees. |
| **Bank Account Details sort code – 87 34 51 A/c No – 86377868 – please include fencers name in payment reference****If paying by cheque, please make out to Shetland Fencing Club** |

|  |
| --- |
| By returning this completed form and fees, I agree for my child to take part in the club’s activities and acknowledge they need to abide by its code of conducts.  |
| Name:  | Signature: (no need to sign if returning online) |
| Date: |  |

Please contact Phil Hibbert on philhibbert@icloud.com or 07879410004 if you wish to ask anything about membership or anything about the club.