

**MEMBERSHIP APPLICATION FORM**  
**MERCIAN MOUNTAINEERING CLUB**



**APPLICANT DETAILS**

Name:	Date of birth:
Email:	Phone Number:
Address:	

**MOUNTAINEERING EXPERIENCE**

My mountaineering experience entails:

**MERCIAN MEETS HISTORY**

I have attended the following two Mercian Mountaineering Club meets:

1.	2.
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**OTHER ORGANISATIONS**

I am a member of the following organisations that are related to mountaineering:

**DECLARATION**

I ACCEPT THAT CLIMBING AND MOUNTAINEERING ARE ACTIVITIES WITH DANGER OF PERSONAL INJURY OR DEATH. I AM AWARE OF AND SHALL ACCEPT THESE RISKS AND WISH TO PARTICIPATE IN THESE ACTIVITIES VOLUNTARILY AND SHALL BE RESPONSIBLE FOR MY OWN ACTIONS AND INVOLVEMENT. I UNDERSTAND THAT THE CLUB BMC INSURANCE COVER RUNS FROM MARCH EACH YEAR. I AGREE TO ABIDE BY THE RULES AND CONSTITUTION OF THE MERCIAN MOUNTAINEERING CLUB.

Signed:	Date:
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**FOR INTERNAL USE - TO BE FILLED IN BY THE CLUB SECRETARY**

Proposer (Date):	( )	Seconder (Date):	( )
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