

**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 Mercian Mountaineering Club meet/s:

1.

(Optional) 2.

**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:

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

Proposer (Date):

( )

Seconder (Date):

( )