

Dartmoor Slope Soaring Club

Membership Application – 2020

Please note that club membership fees are payable in January of each year but it would be helpful if you could return this form as soon as possible to avoid delays. Existing B.M.F.A. insurance expires on 31st December 2019

Membership of the D.S.S.C. is conditional on you also having B.M.F.A. membership. You are, however, only required to pay ONE subscription to the B.M.F.A. even though you may have membership of other clubs. B.M.F.A. membership includes £25 million Third Party Public Liability Insurance cover as well as other benefits, and costs £38.

Your membership application should be made by completing the appropriate sections of this form and returning it to: **John Harvey, 22 North Rocks Rd, Churston, Paignton, TQ4 6LF (Tel: 01803 842261 - Cheques made payable to D.S.S.C.)**

Full Name: **Date Of Birth:**

Address:

Home Tel. No.: **Mobile Tel. No.:**

B.M.F.A. Membership No: **TX/RX Crystals Used:**

Email Address:

Please tick the box to confirm that you are willing to have your name, address, e-mail & telephone number/s circulated to other members of the DSSC, this is optional:

NB This information supplied by you to the Club will be dealt with in accordance with the DSSC Privacy Policy, which can be found on the club's website at.....
<https://dssc.bmfa.org/members-area/club-documents/>

Tick the type of D.S.S.C. Membership you require (tick only one:)

Senior D.S.S.C. (£10) & B.M.F.A. Membership (£38) Registration if req + £9	£57.00 <input type="checkbox"/>
Senior D.S.S.C. membership (paying B.M.F.A. direct/through another club)	*£10.00 <input type="checkbox"/>
Junior (Under 18) D.S.S.C. (£1) & B.M.F.A. Membership (£17)	£18.00 <input type="checkbox"/>
Junior (Under 18) D.S.S.C. membership (paying B.M.F.A. direct/through another club)	£1.00 <input type="checkbox"/>

*Senior DSSC country membership (residing outside of Devon)

£5 *

Please tick all boxes as applicable below

C.A.A. Competency Test Pass.....

B.M.F.A Competency Test Pass.....

B.M.F.A. Achievement Level (if any):

I confirm I have read and understand the CAA privacy notice relating to registration with the CAA and agree to BMFA providing my name, date of birth, address, DOB, and email address (if applicable) to the CAA as part of the process.....

I am insured with BMFA individually or through another club....

All members please sign here....