

THE RED ROSE CAVE AND POTHOLE CLUB

Headquarters:-

BULLPOT FARM, CASTERTON, CARNFORTH, Lancs. LA6 2JP

Telephone KIRKBY LONSDALE (015242) 71837

<<http://www.rrepc.org.uk>>

President: PETER LLEWELLYN

SEE REVERSE OF THIS
FORM FOR CURRENT
MEMBERSHIP FEES AND
PUBLIC LIABILITY
INSURANCE PREMIUM
BEFORE FILLING IN THIS
FORM!



from the office of:-

Membership Secretary:

Heather Eastwood,
45 Haws Hill
CARNFORTH
LA5 9DD
Tel. 01524.736074

APPLICATION FOR FULL / SOCIAL ONLY MEMBERSHIP

TICK HERE FOR **FULL**
MEMBERSHIP (send £20 probationary fee
+ insurance premium - see overleaf)

TICK HERE FOR **SOCIAL ONLY**
MEMBERSHIP (send £15 Social Membership fee
+ insurance premium - see overleaf)

Prospective members applying for **FULL MEMBERSHIP** must after having their application accepted by the committee first serve a six months probationary period during which time they must attend at least two official Club underground meets. They will then be asked to attend a Club committee meeting, where their application for **FULL** membership will be considered.

Social Only Membership is available for non caving members. **Compulsory Public Liability Insurance is in addition to membership fees and is currently £18 per annum (pro rata per complete quarter year) unless paid via another club - Details required by insurance administrator. Before submitting application form please check current fee required on reverse of this form.**

Name in Full (BLOCK CAPITALS)

Mr - Mrs - Miss - Ms (please circle preference) Date of Birth 19

Address

.....

..... Postcode

Tel. Number (Area Code) (Number) **E-MAIL** (PRINT).

I agree to abide by the Constitution of The Red Rose Cave and Pothole Club

Signed Date 20

Consent of Parent / Guardian must be given if applicant is under 18 years of age

Signed Name

This section MUST be completed before submitting application.

PROPOSER Signed Name Dated 20.....

SECONDER Signed Name Dated 20.....

This application form should be returned to the Membership Secretary together with **the stated membership fee (+ insurance premium if applicable) or for Social Membership, stated membership fee + insurance if applicable**
NOTE: Social membership is not cover caving.

DATA PROTECTION ACT 1984: We are obliged to inform you that we store information obtained from this form on a computer database for the purpose of club records, the mailing of club literature and communication between members.

For Official use only:

Noted By:- Secretary (HE) Election Due.....

Accept Defer Reject

Treasurer (HM) Paid Fee on election

Probationary Membership & Insurance An Explanation

When you complete your application form you need to do the following:

1. Fill in all the details asked for.
2. Obtain signature of a Proposer and Seconder (they need to be Full members)

Enclose **appropriate fee** from chart below

NOTE: If you are insured through another club with BCA fill in box below before submitting application form

4. Send all this to the Secretary.
5. Upon acceptance, your probationary period will last 6 months from the date of application.

In that time you must attend at least 2 club caving meets with the club.

R.R.C.P.C. - 2009 Fees:

TYPE OF MEMBERSHIP	APPLICATION DATE			
	1 st . January to 31 st . March	1 st . April to 30 th . June	1 st . July to 30 th . September	1 st . October to 31 st .December
Caving:				
Probationary Fee	£20.00	£20.00	£20.00	£20.00
Insurance	£16.00	£12.00	£8.00	£4.00
TOTAL	£36.00	£32.00	£28.00	£24.00
Non Caving:				
Probationary Fee	£20.00	£20.00	£20.00	£20.00
Insurance	£5.00	£3.75	£2.50	£1.25
TOTAL	£25.00	£23.75	£22.50	£21.25
Social Only:	Does not include ANY caving related activity			
Probationary Fee	£10.00	£10.00	£10.00	£10.00
Insurance	£5.00	£3.75	£2.50	£1.25
TOTAL	£15.00	£13.75	£12.50	£11.25

If you are insured for Public Liability Insurance with another club for the whole of 2009, please complete the details below. If so, you need not pay the additional insurance premium.

I confirm that I am currently insured for Public Liability Insurance through the club stated below

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This information will be passed onto BCA insurance administrator.