



SENIOR

Swindon *fencing* Club

www.swindonfencing.org.uk

Welcome to the Swindon Fencing Club.

The purpose of this form is to gather personal data for the Club records to enable us to contact you in the future, about events that may be of interest to you. It also enables us to ensure that you are acquainted with the general safety requirements and Club rules.

The information you give below will **not** be disclosed to any third parties.

PERSONAL INFORMATION: **Required Information** *

Name:*

Surname:*

Telephone (Work):

Telephone (Home):

Telephone (Mobile):

E-mail: address:

Emergency contact:*

Do you have any health problems or medical conditions which the Club should be aware * **YES/NO** of and which may require special treatment (e.g. heart condition, asthma, allergies, etc)?
(If yes, please detail on the reverse of this form).

GENERAL:

Previous fencing experience? **YES / NO**
Information pack received and studied? **YES / NO**
Safety regulations read and understood? **YES / NO**

WEAPONS FENCED:

Foil? **YES / NO**
Sabre? **YES / NO**
Epee? **YES / NO**

In order to obtain personal insurance we recommend that you should be a member of the British Fencing Association (BFA). Membership provides FIE Licence, third party insurance and allows entry to competitions.

BFA Licence Number (if already a member):

If you are not already a member of the BFA please complete the enclosed application form. Please provide us with your BFA Licence Number once you have received it.

Signature:
(Parent/Guardian if under 18)

Date: