

Cambridge Gliding Centre



Application For Short Term Membership

This part is to be retained by the parent/guardian. The lower part of this form should be completed by the parent/guardian and returned to the Section Leader by the date shown.

Section			
Activity	Gliding		
Date	April 1st - 2nd	Location	Cambridge Gliding Centre
Meet at (location)		Time	
Collect from (location)		Time	
Cost £	5 0	Cheques payable to	
		Required by	

Transport Arrangements	Please bring / wear
	See separate kit list

Additional Information

Leader		Telephone	
In Touch Contact		Telephone	
		Mobile	

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Please return by In an envelope marked

Name of Young Person	
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Activity	Gliding	Date	
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The following declaration must be completed before you fly

On occasions, photographs and videos of Scouts taking part in activities are taken for a variety of uses. These may be submitted to newspapers, newsletters and websites or for display. If you have any objections please indicate below that you are not willing for your child's image to be used in this way

I hereby apply for short term (one day) membership of the Cambridge Gliding Centre.
I hereby undertake to observe the rules and regulations of the Centre and to pay my flying and any other charges as required by the rules and regulations or as determined by the committee of the Centre.

BGA Declaration of Medical Fitness

I hereby declare that I have never suffered from any of the following, which I understand may lead to a dangerous situation in flight: Epilepsy, Fits, Severe Head Injury, Recurrent Fainting, Giddiness or Blackouts, High Blood Pressure, a previous Coronary.

I am not taking insulin regularly for the control of diabetes. I understand that minor illnesses, inoculations, drugs and the donation of blood may make me temporarily unfit to fly. I will inform my instructor of any existing medical condition which may have an adverse effect in flight.

I have noted the arrangements above and agree to the named young person taking part in activity.

Signed		Date	
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Relationship to young person	
Contact phone number during this activity	