



LION OF AFRICA INSURANCE



itheko SPORT ATHLETIC CLUB

### Sub-Junior Membership Application Form 2017

New membership application

Renewal of membership

#### Personal Information

Is your parent a member Yes  No

If yes, indicate Licence Number

Date I joined Itheko AC

Junior's Surname

Junior's Name

Initials

Birth Certificate or ID Number

Gender  Female  Male Date of birth  Age

Residential address   
Postal code

Postal address (if different to residential address)   
Postal code

Tel code  Telephone number (home)

Cellphone number

Email address of Parent / Sub-Junior

#### Membership Fees

R 100 Annual membership

#### My previous running experience

.....  
.....  
.....

#### My aims/goals in joining the Club

.....  
.....  
.....

**Parent Medical Information**

Medical aid name and plan

Medical aid number

Principle member

Sub-Junior's Medical conditions (asthma, etc.)

Chronic medication

Blood Type

**Contact person in case of emergency**

Surname  Title (Mr/Mrs/Miss/Dr)

Name  Initials

Relationship

Tel code  Telephone number (home)  Tel code  Telephone number (work)

Cellphone number

- By signing this form, I hereby declare that the above information given is true and correct. I further declare and agree:**
- To abide by the constitution\*\* of Lion of Africa Insurance (LOA) - Itheko Sport Athletic Club
  - To abide by the rules and regulations of ASA \*\*\* (Athletics South Africa) and WPA (Western Province Athletics)
  - To indemnify LOA - Itheko Sport Athletic Club, its coaches, officers and assistants against all and any action of whatever nature for any loss, damage, illness or injuries that may be sustained or arise out of my participation in any training session, race or social event
  - That it is my responsibility to ensure that my child/ child I am responsible for, is medically fit to train and compete in any event
  - To at all times behave in such a manner so as not to bring the name of LOA - Itheko Sport Athletic Club into disrepute
  - To at all times inform LOA - Itheko Sport Athletic Club of any change in medical conditions and any other relevant information

Signature of parent / guardian where applicant is under 18 years \_\_\_\_\_ Date: \_\_\_\_\_

Signature of LOA - Itheko Sport AC Representative \_\_\_\_\_ Date: \_\_\_\_\_

\*\* The constitution of LOA - Itheko Athletic club can be found at [www.itheko.club](http://www.itheko.club)  
 \*\*\* Rules and regulations of the WPA and ASA can be found at [www.wpa.org](http://www.wpa.org) and [www.athletics.org.za](http://www.athletics.org.za)

For more information: [admin@itheko.club](mailto:admin@itheko.club) and the membership page at [www.itheko.club](http://www.itheko.club)

**WELCOME TO THE LION OF AFRICA INSURANCE - ITHEKO SPORT ATHLETIC CLUB FAMILY !**

**FOR OFFICE USE ONLY**

CAPTURED BY: \_\_\_\_\_ DATE: \_\_\_\_\_