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| Membership Year: | |
|------------------|--|

OMC MEMBERSHIP APPLICATION FORM

Please complete this form as part of the membership process and return to a member of the OMC Committee

Please **PRINT** your details on this form

| | |
|------------|--|
| Last Name | |
| First Name | |

| | |
|-----------------------|--|
| Address and Post Code | |
| | |
| | |

| | |
|----------------------|--|
| Home Tel: | |
| Mobile Tel: | |
| Work Tel (optional): | |
| Email address: | |
| Date of Birth: | |

| | | | | |
|------|------|--|--------|--|
| Sex: | Male | | Female | |
|------|------|--|--------|--|

| | | |
|--|-------|-----|
| Please add names and date of births of children of member if participating Junior members | Name: | DoB |
| | Name: | DoB |
| | Name: | DoB |

| | | | |
|--------------|--------|------|--------|
| Payment Type | Cheque | Cash | PayPal |
| | | | |

Please contact membership secretary for latest fees. Contact can be made by e-mail at omc-secretary.com

Cheques to be made payable to "Ochils Mountaineering Club"

DATA PROTECTION

Information provided by members is used for the administration of the club and its activities. The OMC is a member of the Mountaineering Council of Scotland and member's details are shared with the MCofS for administration of insurance and other membership benefits. Information is not shared with any other third parties.

Your information is only shared with other club members if you agree by ticking this box:

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OMC NEWSLETTER

I wish to receive the OMC Newsletter in the following form:

| | | |
|------|-------------------------|-----------------------|
| Post | Download from Website * | Pick up at the club * |
| | | |

* If at all possible, in the interests of reducing costs please download / collect your newsletter rather than have it posted

To be completed by the members who walked or climbed with you and are sponsoring your application

| | | | |
|------------|--|------------|--|
| Print Name | | Print Name | |
| Signed | | Signed | |

APPLICANTS SIGNATURE:

Signature: _____

Date: _____

Admin Use:

| | |
|----------------------------|--|
| Date application accepted: | |
|----------------------------|--|