



# MEMBERSHIP FORM

Relevant Notes

Entered on  
Computer

SIDETARGET LIMITED TRADING AS  
**SKYDIVE HIBALDSTOW**

OFFICE ☎: 0113 250 5600 OFFICE FAX: 0113 250 4666 DZ ☎: 01652 648837 DZ FAX: 01652 648522

## Member Details

Full Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Post Code \_\_\_\_\_ Home Tel. \_\_\_\_\_

Mobile Tel. \_\_\_\_\_ Work Tel. \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ E-mail \_\_\_\_\_

Gender  Male  Female

**OFFICE USE ONLY**

Static Line  AFF  Tandem  DVD

Date of training / /

## Emergency Contact Details

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Contact Tel \_\_\_\_\_ Other No. \_\_\_\_\_

## Documents and Kit (to be completed by Centre Instructor/Staff) BPA: Full Temp P6

BPA No. \_\_\_\_\_ Expires \_\_\_\_\_ FAI A  B  C  D  No. \_\_\_\_\_

Medical  Self  Doctor (Expires \_\_\_\_\_) No. Jumps \_\_\_\_\_ Date Last Jump \_\_\_\_\_

FAI Grades  JM1  CH2  FS1  FF1 Other Notes \_\_\_\_\_

Documents Checked by \_\_\_\_\_ Date Checked \_\_\_\_\_

Container \_\_\_\_\_ Main Canopy \_\_\_\_\_

Reserve \_\_\_\_\_ Reserve Repack Due \_\_\_\_\_

AAD  Yes  No AAD Type \_\_\_\_\_ FAI 'A'-license holders -  AAD Checked

2<sup>nd</sup> Container \_\_\_\_\_ Main \_\_\_\_\_ Reserve \_\_\_\_\_ Due Date \_\_\_\_\_  AAD

Kit Checked by \_\_\_\_\_ Date \_\_\_\_\_

Please turn over to read and sign the Agreement and Terms... ➡

# Agreement and Terms

Ver. 5c – May 2008

In consideration of your accepting me as a member of Skydive Hibaldstow Parachute Centre (the Club) and of your authorising experienced and competent Instructors and Staff to supervise my training and instruction as a parachutist I hereby acknowledge and agree:

1. That I am fully aware of, and fully accept, the risks and dangers inherent in the activity of parachuting, and in particular the increased dangers of failing to adhere to the methods and regulations as advised and notified to me.
2. That I enter into this agreement voluntarily and entirely at my own risk. I agree that neither the Club nor its Staff will be held liable in the event of any loss, injury or damage (howsoever caused) caused to any property or suffered by me, or any other person, in connection with or as a result of parachuting or any of the activities carried on by, or facilities provided by, the Club.
3. So as to bind myself, my heirs, my Personal Representatives and assigns I hereby indemnify the Club – all the members thereof – and all the Instructors, agents and Staff employed by the Club against any claims, demands or liability which may arise in respect of any such loss, injury or damage. I understand that in the event of any such loss, injury, damage or death, no compensation or damages will be payable to me, my dependants or my estate and that it is my responsibility to effect such insurance cover as I may require.
4. That I will be bound in all aspects by the Company's Memorandum and Articles of Association and will comply with its Safety Regulations, and all the Rules and Regulations of the owners or occupiers of the land and premises used by the Club. I further agree to obey all relevant instructions given to me by the Club, its Staff, servants or agents.
5. That the Club has my authority to use part of the membership fee paid by me to effect a contract of Third Party Public Liability Insurance, which insurance shall be effective throughout the period of my membership and shall cover, up to such limit as the Club shall from time to time determine, my personal liabilities for death or injury to persons or damage to property caused during the course of any approved sport parachute jump made by me. For this purpose, the duration of the jump shall be from the time of entering an aircraft for the purpose of making an approved sport parachute jump until disengagement from the harness following the jump.
6. That I will notify the Club within THREE working days of any incident involving a Third Party resulting from any approved sport parachute jump made by me.
7. That references to the "Club" and/or "Centre" shall mean and include the Company Sidetarget Limited – Target Skysports Parachute Centre – Skydive Hibaldstow – and all the members thereof.
8. I agree to read, abide by and stay current with the Centre Rules and Regulations, copies of which may be found within the Centre SOPs, on the office notice board, the notice board in the games room or by request to a member of Staff. I understand that failure to comply with the Centre Rules, Regulations and SOPs and those of the BPA may result in exclusion from any and all skydiving activities.
9. **That deposits paid are non-refundable for any reason. The remaining payment for the course or jump must be paid prior to starting the course or briefing. Once I have started the course training or briefing no refunds can be made, either in full or in part, for whatever reason the jump or course cannot be completed.**
10. For AFF students, I understand that any repeat levels must be paid for in addition to the course fee.
11. I declare that I am 18 years of age or over\* or I am under 18 years of age\*. The minimum age for parachuting and skydiving is 16 years old.



Signed



Date



\*Delete as appropriate, and **if under 18 years of age the following must be completed** by the parent or guardian of the proposed member. To SKYDIVE HIBALDSTOW,

I \_\_\_\_\_ (Name in block capitals) of \_\_\_\_\_ (Address)

being the Mother/Father/Legal Guardian of the proposed member who is now aged \_\_\_\_\_ years hereby confirm that I have given my permission for the proposed member to make parachute descents and that both on my behalf and of the proposed member I agree to the terms set out above.

Signed \_\_\_\_\_ Date \_\_\_\_\_