



Membership Form

Thank you for your interest in joining DARTS FOR ALL. Please complete this form to become a member. All information will be kept confidential and used solely for group purposes.

If you need assistance filling out this form, contact Gary Siddons by email gary@dartsforall.uk or by phone **07958 644444**

Personal Information

Full Name

Date Of Birth

Address

Phone Number

Email Address

Emergency Contact

Name

Relationship

Phone Number

<p>Would you like to participate in tournaments?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Skill Level (optional)</p> <p><input type="checkbox"/> Beginner <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced</p>
<p>3 Dart Average:</p>	
<p>How did you hear about us?</p> <p><input type="checkbox"/> Word of Mouth <input type="checkbox"/> Social Media <input type="checkbox"/> Local Event <input type="checkbox"/> Other (please specify):</p>	
<p>Do you have any darts-related experience? (Optional)</p>	
<p>Would you be interested in contributing to the group as a volunteer? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	
<p>If so, do you have any skills or specific interests that might contribute to the group? (e.g., organising events, social media, coaching)</p>	

Membership Agreement

By signing below, I agree to:

1. Abide by the **Code of Conduct** of Darts For All. (available online at www.dartsforall.uk)
2. Treat all volunteers, members, equipment, and venues with respect.
3. Notify the group organiser of any changes to my contact information.

<p>Signature</p>	
<p>Date</p>	

Welcome to the team!