

TO OBTAIN YOUR CERTIFICATE RETURN WITHIN 3 MONTHS, WITH THE CORRECT FEE TO: British Canoeing, National Water Sports Centre, Adbolton Lane, Holme Pierrepont, Nottingham, NG12 2LU [PLEASE COMPLETE THE FORM CLEARLY IN CAPITALS. *These fields are compulsory]			
Date:	Examiner Name:		
Location:	Examiner Membership Number:		
Candidate Details *Forename: *Surname: *Address: *Postcode: *Date of Birth: *Male <input type="checkbox"/> Female <input type="checkbox"/> (please tick) Candidate BC Membership Number (if applicable): Tel: *Email: *Do you consider yourself to have a Disability? YES <input type="checkbox"/> NO <input type="checkbox"/> PREFER NOT TO SAY <input type="checkbox"/> (please tick)	Certificate Return Address (if different) Name: Address: Postcode:		
	1 Star	Examiner Signature	Fee Enclosed: (please tick) BC Member £6 <input type="checkbox"/> Non Member £7 <input type="checkbox"/>
	2 Star	Examiner Signature	Fee Enclosed: (please tick) BC Member £6 <input type="checkbox"/> Non Member £7 <input type="checkbox"/>
	<i>Cheques to be made payable to British Canoeing</i>		
	Please tick this box if you do not want to receive information from British Canoeing <input type="checkbox"/>		
<small>Personal data in this form may be used only in accordance with British Canoeing's notification under the Data Protection Act 1998 and in compliance with the Freedom of Information Act 2000. To comply with statutory and Government requirements, data may be disclosed to external agencies such as (but not exclusively): Sport England and UK Sport. British Canoeing will not disclose any personal information to any other third parties, except where required by law, without the express consent of the Data Subject.</small>			

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