

Colwall Cricket Club

We are very pleased to welcome you to Colwall Cricket Club. To ensure that we have your correct contact details. Please fill out this Membership Form and return it to the club on signing on day or your first coaching session.

We will also use this information to ensure that you are kept informed about club events. If you are under the age of 18 please ask your parent/guardian to sign the Form before it is returned.

Category of Membership

Junior playing member under 18	£35
Paid by Cheque	<input type="checkbox"/>
PayPal	<input type="checkbox"/>
Cash	<input type="checkbox"/>

Personal details (young person under the age of 18)

Name: _____

Address: _____

Age: _____ School year _____ Date of Birth _____

Name of School/College: _____

Have you played School/ County, or District cricket ? _____

Personal details (parent/guardian) Relationship: _____

Name: _____

Address: _____

Home tel: _____

Mobile tel: _____

Email Address : _____

Alternative Emergency contact: _____

Medical Information

Please detail below any important medical or disability information that our coaches/junior coordinator should be aware of (e.g. Sensory impairment, epilepsy, asthma, diabetes, dietary allergies etc)

Photographs and Recorded Images:

Colwall Cricket Club will not permit photographs, video images or other images of young people to be taken or used without the consent of the parent/guardian and the young player. Colwall Cricket Club will take steps to ensure that these images are used solely for the purpose they are intended, which is the promotion and celebration of cricketing activities.

Transport to matches and Practice sessions:

Colwall Cricket Club's policy is that the parent/guardian is responsible for transporting their children to and from all matches and practice sessions and therefore the Club will not be registering Private Vehicles for the transportation of individuals in connection with any fixtures or practice sessions arranged by the Club.

Volunteering

Due to increased junior numbers the Club will ask parents and guardians of all junior member to volunteer a couple of times during the cricket season, especially on busy cricket training evenings. This may involve helping out with training, and various clubhouse duties as set out in a rota at the beginning of the season.

By returning this completed form and ticking the boxes

- I confirm that I have legal responsibility for the child named above and am entitled to give this consent
- I agree to my son/daughter/child in my care, taking part in the activities of the club
- I confirm that my child will comply with the junior Rules
- I confirm that I understand the spirit of the Parents/Spectators code of conduct.
- I also give consent to the use of photography or video by the club in the coaching of cricket in respect of my child
- I understand that I will be kept informed of cricket activities at the club - for example timing and transport details for away matches when my child is involved.
- I understand that in the event of any injury or illness, all reasonable steps will be taken to contact me or the alternative contact and to deal with that injury/illness appropriately and that the club may act in loco parentis in such a situation.
- I confirm that my child has to wear a helmet whilst batting or wicket keeping (standing up) against a hard ball
- I am aware that should my child play for a senior adult team he/she may have to share changing and showering facilities with adults
- I confirm that I have read or been made aware of the club's policies transport and managing children away from the club
- I am happy to be included in the volunteering rota
- I confirm that, to the best of my knowledge, all information on this form is accurate and I undertake to advise the club of any changes
- Data protection** I understand and agree that the Club will use the information on this form and other information about the player to administer cricket activities at the club and that in some cases this may require the club to disclose the information to Leagues, County Boards and the ECB. In the event if a medical issue or child protection issue the Club may disclose information to the relevant authorities
- I confirm to the best of my knowledge that my son/daughter does not suffer from any medical condition other than those detailed above
- I consent to my child receiving medical treatment which, in the opinion of a qualified medical practitioner, may be necessary

Name of Parent/Guardian:

Signature of Parent/Guardian:

Date: