



Barford Cricket Club

Junior Membership Form

We are very pleased to welcome you to Barford Cricket Club. To ensure we have the correct contact details for you, please fill out this membership form and return it to Club Secretary Paul Johnstone. barfordsec@gmail.com

Personal information for junior and their parent/legal guardian:

Junior's first name: _____

Surname: _____

Address: _____

Postcode: _____

Home telephone: _____

Date of birth: ___ / ___ / ___

Name of parent or legal guardian: _____

Email address for parent/guardian: _____

Mobile for parent/guardian: _____

(NB if no change in personal/emergency/medical details from last year just write NO CHANGE)

Alternative emergency contact information:

In the event of an incident or emergency situation where a parent or guardian named above cannot be contacted, please provide details of an alternative adult who can be contacted by the club. Please make this person aware that his/her details have been provided as a contact for the club:

Name: _____

Relationship: _____

Mobile: _____

Medical information:

Please detail below any important information that we should be aware of (eg. Epilepsy, asthma, diabetes, allergies etc)

Disability:

The Equality Act 2010 defines a disabled person as anyone with 'a physical or mental impairment', which has a substantial and long-term adverse effect on his or her ability to carry out normal day-to-day activities'

We will only use this information to establish if there are any additional needs / support / adjustments you may require, please discuss this with us.

Do you consider this child to have a disability? Yes No

If yes, what is the nature of their disability?

- Visual impairment Hearing impairment Physical disability
 Mobility impairment Dexterity impairment Learning disability
 Memory impairment Mental health impairment
 Stamina, breathing or fatigue impairment Developmental impairment
 Other please specify:
-
-

Sporting information

Has this child played cricket before? Yes No

If yes, where has this cricket been played?

- Primary school Secondary school Club
 County / District Local authority coaching sessions
 Other please specify:
-

These sections MUST be completed, even if no changes)

Consent statement from parent/guardian

Legal authority to provide consent:

I confirm that I have legal responsibility for _____
(Name of child) and am entitled to give this consent

Medical consent

I give my consent that in an emergency situation, the club may act in my place (in loco parentis), if the need arises for the administration of emergency first aid and/or other medical treatment which, in the opinion of a qualified medical practitioner, may be necessary. I also understand that in such an occurrence all reasonable steps will be taken to contact me or the alternative adult which I have named in this form.

Consent to participate

I agree to the child named above taking part in the activities of the club.

I confirm I have read, or have been made aware of, the club's policies concerning:

- | | |
|--|--|
| <input type="checkbox"/> Changing/showering | <input type="checkbox"/> Missing children |
| <input type="checkbox"/> Transporting children | <input type="checkbox"/> Playing in open age (senior) matches |
| <input type="checkbox"/> Photography / video | <input type="checkbox"/> Anti-bullying and the code of conduct |
| <input type="checkbox"/> Managing children | <input type="checkbox"/> Social media, text and email |

I understand and agree to the responsibilities which I and my child have in connection with these policies

I consent or I do not consent
to the club photographing or videoing the junior member's involvement in cricket under the terms and conditions of the club photography/video policy

Consent from child in connection with club photography/video policy

(For players aged 12-18)

I consent or I do not consent
to the club photographing or videoing my involvement in cricket under the terms and conditions of the club photography/video policy

Signed (child if 12 years or older): _____

Date: ____ / ____ / ____

Personal data

Barford Cricket Club take the protection of the data that we hold about you as a member seriously and will ensure that the data you provide is processed in accordance with data protection legislation.

Please read the full privacy notice carefully to see how the Club will treat the personal information that you provide to us. (See Barford CC Privacy Notice)

Membership agreement

By returning this completed form, I confirm that I have read and understand the permission statements on this membership form and the privacy notice

Full name of Junior Member: _____

Name of parent/guardian: _____

Signature of parent/guardian: _____

Date: ____ / ____ / ____

Payment of membership

Junior (Under 18) £10.00

Tick as appropriate:

- Cash
- Cheque payable to Barford Cricket Club via Phil Morris, Treasurer
- BACS transfer (Ref if known _____)

HSBC Warwick
Sort code: 40-45-25
A/C number: 01056050