

Barford Cricket Club

Senior 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:		
First name:	Surname:	
(NB if no change in personal/emergency/medical details from last year just write NO CHANGE)		
Address:		
Postcode: Email:_		
Home telephone:	Mobile:	
Date of birth://		
Emergency contact information:		
Name:		
Relationship:		
Mobile:		
Medical information: Please detail below any important information: 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 yourself to have a disability? ☐ Yes ∏No If yes, what is the nature of your 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: Consent to participate (these sections MUST be completed, even if no changes) I agree to take part in the activities of the club. I confirm I have read, or have been made aware of, the club's policies concerning: Changing/showering Missing children Transporting children Playing in open age (senior) matches Anti-bullying and the code of conduct Photography / video Social media, text and email Managing children

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		
Date:/	_/	Signature:
Payment of mem	bership:	
Adult Unwaged Life membership		
Tick as appropri	iate:	
☐ Cash		
☐ Cheque payable to Barford Cricket Club via Phil Morris, Treasurer		
BACS transfer (Ref if known)		
HSBC Warwick Sort code: 40-45- A/C number: 010		