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| Child’s first name: Surname: |
| Parent’s first names: Surname: |
| Address: |
| Postcode: |
| Junior School: School Year: 3 4 5 6 |
| Senior School: School Year: 7 8 9 10 11 |
| Date of Birth: |
| Home Telephone: |
| Mobile 1: Mobile 2: |
| E-mail: |
| Friend/Relative/Alternative Emergency Telephone Number: |

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| **MEDICAL INFORMATION** |
| Please detail below any important medical information that our coaches/junior co-ordinator need to know, and which would be affected by your child’s participation in cricket activities. Such as: allergies; medical conditions (for example - epilepsy, asthma, and so on); current medication; special dietary requirements, any additional needs, and/or any injuries. Please indicate if you would like to discuss this privately with us. |
|  |
| Name of doctor/surgery name |
| Doctor’s telephone number |
| Medical consent:  I consent to my medical details to be shared with coaches/leaders for the purposes of the delivery of my safe participation in the cricket club activity.    Not providing consent will not affect your child’s membership to the Club, however giving us consent to share this information will help club volunteers to know how to respond effectively in the case of any medical emergency. |
| |  | | --- | | **PARENT/LEGAL GUARDIAN PARTICIPATION AGREEMENT:** | | 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 clubs policies concerning:  Changing / showering Missing children      Transporting children Playing in open age (senior) matches      Photography / video Anti bullying and the code of conduct        Social media, text, and email    I understand and agree to the responsibilities which I and my child have regarding these policies.      I also confirm I have been given comprehensive details of the home and away fixtures in which my child may  participate | |

**P.T.O.**

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| |  | | --- | | **CLUB PHOTOGRAPHY/VIDEO CONSENT** | | I consent to the club photographing or videoing the junior named involvement in cricket in line with the club photography/video policy.    Photographs and video may be used for match reports, publicity, or training purposes. Young people will not be named  in photographs and all images will be deleted after use.  If you do not wish to give consent for this, please contact us to discuss how we can manage any potential photography.  Not giving consent will not affect your child’s membership of the club. |  |  | | --- | | **PRIVACY STATEMENT** | | Wickford 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 below carefully to see how the Club will treat the personal information that you provide to us. | | **PARENT/GUARDIAN AGREEMENT** | | By returning this completed form, I confirm that I have legal responsibility of the junior named and that I have read and    understood the permission statements on this membership form and the privacy notice below.  Date: Signature: | |
| **Fees:** Under 11 [Yrs. 5/6] £35, Under 13 [7/8] £45, Under 18 [9 - 13] £55. 3rd Child free. |
| Fees can be paid direct to Wickford Cricket Club at Barclays bank code 20-04-96, account number  70683450 [please quote your child’s name in the reference box]. |
| I am interested in volunteering at the Club with Administration/coaching **Yes/No** |

Please return completed form to Alan Moss, 3 Manor Close, Ramsden Heath, Essex, CM11 1NZ

Enquiries to Alan Moss - Tel: 00268 711095 email: alordofthemanor@aol.com

By signing this form, I give permission that my contact details may be shared with other members of Wickford Cricket Club Junior section. Captains of Wickford Cricket Club adult teams may also be given your details for Year 9s and older.