Junior Membership Form 2016

South Nutfield Cricket Club

Welcome to South Nutfield Cricket Club. This Junior Membership Form should be completed by the parent or legal guardian of any player under the age of 18 and must also be signed by the player. Please complete this form and return it to the Colts Manager or one of the Team Managers.

We will also use this information to ensure that you are kept informed about events and information concerning South Nutfield Cricket Club.



Section 1 – Personal Details of the child applying for Junior Membership

Name:	Owen Dewson
Date of Birth	25 July 2007
Address:	6 Furze Place, Redhill, Surrey RH1 1ER
Name of School / College:	Wray Common School

Section 2 – Contact Details of Parent / Legal Guardian

Name:	lain Dewson	
Relationship to	(e.g. parent / legal guardian)	
child:	Father	
Address:		
	Same as Owen	
Daytime telephone number:	07914354040	
Evening telephone number:	07914354040	
E-mail:	iaindewson@hotmail.com	
Emergency mobile numbers:		

Section 3 – Emergency Contact Details (Alternative Contact)

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

Name:	Corinne Dewson
Relationship to child:	E.g. Aunt, grandparent, neighbour etc. Mother
Address:	Same as Owen

Daytime telephone number:	07914354028		
Evening telephone number:	07137767891		
Section 4 - Sporting Information	ation		
Has the child played Cricket b	efore?	Yes Y	No 🗌
If yes, where have they played	d Cricket?: (pleas	e indicate be	low)
Primary school			
Secondary school			
Special Educational Needs So	chool		
Local authority coaching sess	ion(s)		
Club	M		
County			
Other (please specify)	1000	1.0	

Section 5 – Information about any Impairment

Please provide information about any impairment your child may have so that we can determine what reasonable adjustments may be required to support your child's full participation in club activities.

Do you consider your child / the child in your	Yes	No N
care to have an impairment?		

If yes, what is the nature of the impairment?

Visual impairment	
Hearing impairment	
Physical impairment	
Learning difficulty	
Multiple impairments	
Other (please specify):	

If you have ticked yes in any box above please provide us with any additional information that will assist us to ensure your child is fully supported whilst at the club.

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Section 6 – Medical Information	
Name of Doctor / Surgery:	Greystones House, Station Road, Redhill
Doctor / Surgery telephone number:	01737 761201
Please detail below any important med	ical information that our
coaches/junior coordinator should be a	
diabetes, current medication, injuries et	tc.)
Nut allergy	
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Medical consent:

- □Y 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 as the relevant parent / legal guardian, or the alternative adult I have named in section 3 of this form.
- I confirm that to the best of my knowledge, my child / the child in my care does not suffer from any medical condition other than those detailed above.

Section 7 - Automatic Non- Voting Membership Status

Junior membership of the club also provides that the parent(s) / legal guardian(s) of the child are given non-voting membership of the club as part of that junior membership. This does not entitle the parent(s) / guardian(s) to any additional privileges that would otherwise be gained by paying the appropriate adult membership fee(s). Any use of facilities by parents or legal guardians (for example social / training / playing) may incur such charges as applicable to relevant adult membership.

Section 8 – Data Protection

The Club will use the information provided on this Membership Form (together with other information it obtains about the player) to administer his/her cricketing activity at the Club and in any activities in which he/she participates through the Club and to care for and supervise activities in which he/she is involved.

In some cases this may require the Club to disclose the information to County Boards, Leagues and to the England and Wales Cricket Board. In the event of a medical issue or child protection issue arising, the Club may disclose certain information to doctors or other medical specialists and/or to police, children's social care, the Courts and/or probation officers and, potentially to legal and other advisers involved in an investigation. As the person completing this form, you must ensure that each person whose information you include in this form knows what will happen to their information and how it may be disclosed.

By returning this completed Junior Membership Form, I agree to my child / the child in my care taking part in the activities of South Nutfield Cricket Club.

I confirm that I have legal responsibility for the child named in section 1 above, and that I am entitled to give this consent.

I understand that I will be kept informed of activities at South Nutfield Cricket Club – for example details of times and transport etc.

I understand that in the event of injury or illness all reasonable steps will be taken to contact me / the alternative contact, and to deal with that injury/illness appropriately.

I confirm that to the best of my knowledge all information provided in this form is accurate and I will inform the club of any changes to this information in a timely manner.

huson

Name of parent / legal	
guardian:	

lain Dewson

Signed:

Date:

19 June 2016

(To be completed by the child applying for Junior Membership)

Name:	
Signed:	
Date:	

Section 9 – Code of Conduct

I confirm I have received a copy of the South Nutfield Cricket Club's "Code of Conduct / Set of Rules for Young People" and agree to abide by the Code's provisions and on behalf of my child / the child in my care.

Name of parent / legal guardian:	
Signed:	
Date:	