

## JUNIOR MEMBERSHIP APPLICATION FORM 2022

(for players under the age of 18)

This form is designed to be completed by the parent, or legal guardian of any player under the age of 18. As the person completing or receiving this form, you must ensure each person whose information you include in this form knows what will happen to their information and to whom it may be disclosed. Details are set out in the Privacy Notice on the club website and available from the club. All club policies are also available on the club website.

Once completed, the form should be returned to the Membership Secretary or any committee member at the Club, or emailed to <a href="mailto:secretary@swanagecricketclub.co.uk">secretary@swanagecricketclub.co.uk</a>. Payment can be made by cash, cheques payable to Swanage Cricket Club or bank transfer to: Sort Code 30-99-12 | Account No. 00260769

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Membership Categories: (Please select using t	ick box)
Junior (up to including under 15s) - £25	Students (over 15, under 18 in full time education) - £25
The Club uses the ECB's Play-Cricket system to	store data. Data from this form may, therefore, be entered onto
that system.	
SECTION 1 (MANDATORY): PERSONAL DETAILS OF YOUNG PLAYER	
Name:	
Home address:	
Post code:	
Date of Birth:	(Day) (Month) (Year)
Gender:	
Email address (if over 16 only):	
Home telephone number (if over 16 only):	
Mobile telephone number (if over 16 only):	
If you are <b>over 16</b> and become an official of the Club, the Club may provide the information in this Section 1 County Boards or Leagues that the Club is a member of or affiliated to; to enable them to contact you about cricket matters.	
If you are <b>over 16</b> and a player and attend a County Board or League run event (such as trials, nets or representative fixtures), the Club may provide your name and contact details to the relevant League / County Board to enable them to notify you of arrangements.	
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Name:	ETAILS FOR PARENT/LEGAL GUARDIANS OF YOUNG PLAYER
Home address (if different):	
Post code (if different):	
Email address:	
Home telephone number:	
Mobile telephone number:	
	attend a County Board or League run event (such as trials, nets or ir name and contact details to the relevant League / County Board to





SECTION 3 (OPTIONAL): EMERGENCY CONTACT DETAILS  We will use the above details as a contact in an emergency. If possible, please provide the contact details of an alternative adult below.	
Name of an alternative adult who can be contacted in an emergency:	
Phone number for alternative named adult:	
Relationship which this person has to the child (for example, aunt, neighbour, family friend and so on):	
SECTION 4 (OPTIONAL): 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 deates/suggest acres	
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.	
SECTION 5 (MANDATORY): 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 rooms       ☐ Codes of conduct         ☐ Transporting children       ☐ Playing in open age (senior) matches	
I understand and agree to the responsibilities which I and my child have regarding these policies	
SECTION 6 (OPTIONAL): CLUB PHOTOGRAPHY/VIDEO CONSENT	
I consent to the club photographing or videoing my child's involvement in cricket in line with the club photography/video policy.	
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.	
SECTION 7: PRIVACY STATEMENT	
Swanage 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 (name of child) and that I have read and understood the permission statements on this membership form and the privacy notice below.	
Date: Signature:	
If returning your form via email, please date and sign above and send a scan or photograph of the printed form.	







