



SWARDESTON CRICKET CLUB CIO
JUNIOR (UNDER 18) MEMBERSHIP FORM 2020

E-mail: membership@swardestoncc.co.uk
 SCC website: www.swardestoncc.co.uk

DETAILS OF THE YOUNG PLAYER

Name	
Date of Birth	Male/Female
Current School	
Cricket Experience	
Has the child played cricket before?	(please circle) Yes/No
If so where (school, other clubs, etc.)	

Medical Information

Please detail any medical information that the coaches need to know, eg allergies, a medical condition (eg asthma, epilepsy), any current medication, special diet or additional needs. Please indicate if you would prefer to discuss this privately with us.

Name of doctor/surgery name

Telephone number of doctor/surgery

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".

Does your child have an impairment? (please circle) Yes/No

If yes, what is the nature of their disability? (please circle)

Visual impairment Hearing impairment Multiple disability
 Learning impairment Physical impairment Other - please specify

DETAILS OF THE PARENT/GUARDIAN

Name
Relationship to child
Home address (incl. postcode)
E-mail address
Home telephone number
Mobile telephone number

DETAILS OF AN ALTERNATIVE PARENT/GUARDIAN

Please provide an alternative adult who can be contacted in an emergency if you are not available.

Name
Relationship to child
E-mail address
Home telephone number
Mobile telephone number

IMPORTANT - PLEASE READ

YOUR CONSENT FORM

As a charity and sports club, we take the effective management of children very seriously. We are a Clubmark Club and adhere to the 'Safe Hands' Policy for Safeguarding Children in Cricket. As part of this, it is important to note your consent to activities, so could you please complete the following consents.

Please tick each consent or put a cross if you do not agree

I CONFIRM I have legal responsibility for the child on this form and am entitled to give this consent. I confirm to the best of my knowledge, all information provided is accurate and I will undertake to advise the club of any changes to this information. (please tick)

Medical Consent (please tick)

I CONSENT that, in an emergency situation, the club may act in my place, if the need arises, for the administration of emergency first aid and/or medical treatment which may be necessary. I understand that in such an occurrence all reasonable steps will be taken to contact me or the alternative adult which I have named. (please tick)

I CONFIRM to the best of my knowledge, my child/the child in my care does not suffer from any medical condition other than those detailed on the form. (please tick)

Participation Consent (please tick)

I CONFIRM my consent, for the child on this form, to take part in the activities of the club. (please tick)

I CONFIRM I have read, or been made aware of, the club's policies* which are part of the Club's adherence to the 'Safe Hands' Policy for Safeguarding Children in Cricket as well as the Club's procedures regarding the code of conduct of itself and it's members. I understand and agree the responsibilities which I and my child have in connection with these policies. (please tick)

I CONSENT to the club photographing or videoing my and my child's involvement in cricket under the terms and conditions in the club's Photography Policy and it's Use of Social Media Policy. (please tick)

DECLARATION

Signed (parent/legal guardian)	
Name	
Date of signing	

ANNUAL MEMBERSHIP & MATCH FEES

Member Type	Description	Annual Membership		Match	
		Fee	Received	Fee	Payable
Junior Playing Member	Playing full open-age matches	£10		£5	After each match
Junior Member	Playing Junior matches only	£0		£3	After each match

* Club Policies can be found on the website - www.swardestoncc.co.uk

DATA PROTECTION - Details in this membership form will be held on a secure database for internal club purposes only and to ensure you are kept informed about events and information from Swardeston Cricket Club. It is not released to third parties with two exceptions: if the Club is required to disclose information to the County Boards, Leagues and the ECB; or in the event of a medical issue or child protection issue arising, the Club may disclose certain information to doctors or other medical specialists, police, children's social care and potentially to legal and other advisors involved in an investigation.

If you would be willing to volunteer to assist the Club in some capacity, please tick the box (please tick)