

Junior Coaching

2016 Membership Form

In addition to completing this form please ensure you keep your details up to date on our online systems. This form should be returned signed and completed to Glen Christian or Sam Carpenter **BEFORE** the start of the first session.



This form is intended to allow us to keep you and your child both informed and safe as part of the coaching course. Please read carefully and sign. If you wish your data to be destroyed at the end of the course please let us know otherwise we will keep this written form only for further reference.

PLEASE NOTE your child will not be able to participate in the session if the online form or this form is not signed by a parent or guardian **PRIOR** to the session. If you share your travel etc. with other parents please make sure you have either completed the online medical form or your child has this form **SIGNED** with them before the first session

Personal Details			
<i>Please use the name your child is known by i.e. Freddie or Fred for a Frederick. The course is meant to be fun and we use this information to make sure that your child is happy and in the correct group etc.</i>			
Childs Name		Date of Birth	
School Name		School Year	
Address			
Parent/Carer/Guardian Emergency Contact Details			
<i>In the event of an incident or emergency situation where a parent, carer or legal guardian named below cannot be contacted you agree that qualified coaching staff attending the course have the right to operate in loco parentis</i>			
Name		Contact Telephone	
Relationship to child			
Address (leave blank if as above)			
Email			
Disability			
<i>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'.</i>			
Do you consider this child to have an impairment			
If yes what is the nature of their disability			
Medical Details			
<i>By signing at the bottom of this form you agree that ; In a case of emergency when the parent, carer or legal guardian above cannot be contacted that coaching staff attending the course have the right to administer emergency first aid and / or other medical treatment You confirm that to the best of your knowledge the child above does not suffer from any medical details other than those detailed below</i>			
Name of Doctor / Surgery		Doctors Contact No	
Medical information we should be aware			

of (e.g. Asthma, Allergies, Medication)				
Cricketing Standard <i>Tick one only</i>				
Beginner <i>(none or very little experience)</i>	Softball <i>(Incrediball / Windball etc)</i>	Hardball <i>(1-2 seasons)</i>	Regular <i>(hardball 3+ seasons club and / or school)</i>	Experienced <i>(district / county player)</i>

Consent and Agreement

By returning this completed form you

- 1) Agree to your child / the child taking part in the coaching sessions at Horsmonden Cricket Club (or other HCC site) organised by Horsmonden Cricket Club.
- 2) Confirm you have read the Code of Conduct for Cricket Club Members and Guests and agree that you and the child detailed on this form will abide by them.
- 3) Confirm you have legal responsibility for the child names and entitled to give consent detail on this form
- 4) Confirm to the best of your knowledge all information provided is accurate and you will advise the club or update the details online
- 5) Give your consent that in an emergency situation the club may act in loco parentis. You understand that in such a situation all reasonable steps will be taken to contact you
- 6) Confirm that to the best of your knowledge the child named does not suffer any medical condition other than detailed on this form
- 7) Confirm you have read or been made aware of the clubs policies concerning
 - a. Changing and Showering
 - b. Transportation of Children
 - c. Photography and Video
 - d. Managing Children away from the club
 - e. Missing Children
 - f. Playing in adult matches
 - g. Anti-bullying and the code of conduct
 - h. Social media, text and email
- 8) Consent to the club photographing or videoing under the terms and conditions of the club photography / video policy

Parent / Carer / Guardian Signature			
Name		Signature	
Date			

I consent to the club photographing and videoing my involvement in cricket under the terms and conditions of the club photography / video policy

Child Signature and Consent (12 years and older)			
Name		Signature	
Date			