**ADULT MEMBERSHIP APPLICATION FORM 2022 – TOTTON & ELING CRICKET CLUB**

***For club players aged 18 or over***

All forms should be completed in full and returned with the appropriate payment to  
**Kelly Stevens (Treasurer –** [**membership@tottonandelingcc.co.uk**](mailto:membership@tottonandelingcc.co.uk)**)** by **Friday** **6 May 2022**.

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **ADULT MEMBERSHIP RATES 2022** | | | | | | | | | | | | |
| **Please select ONE membership rate from the list below by placing a ‘X’ in the box to the right:** | | | | | | | | | | | | |
| **Adult Member Option 1** | | | £190 all inclusive fee to cover subscription and League & Cup match fees. | | | | | Payable before 6 May 2022 | | | |  |
| **Student Member Option 1** | | | £150 all inclusive fee to cover subscription and League & Cup match fees | | | | | Payable before 6 May 2022 | | | |  |
| **Adult Member Option 2** | | | £85 subscription fee | | | | | Match fees payable £10 per match. Late payment additional £1. | | | |  |
| **Student Member Option 2** | | | £65 subscription fee | | | | | Match fees payable £10 per match. Late payment additional £1. | | | |  |
| Membership Payments can be paid as follows:   * Electronic payments to Sort code 30 -97-58 Account Number 00776568 * Cheque made payable to Totton & Eling Cricket Club * Card payment (to Kelly Stevens, Alex Presland, Richard Dibden, Ian Green, or Nick Edens) | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| **ADDITIONAL MATCH FEES AND SPONSORSHIP** | | | | | | | | | | | | |
| **Additional match fees** | | | 40 over matches | | | | | Match fees payable £3 per match. Late payment additional £1. | | | | |
| Border League | | | | | Match fees payable £3 per match. Late payment additional £1. | | | | |
| **Junior Members** | | | Junior members playing in open age group games. League (£5). Friendlies (£3) | | | | | Match fees payable £5/£3 per match. Late payment additional £1. | | | | |
| **Sponsorship** | | | Secure new sponsor of £300+ | | | | | Subscription & match fees covered for the season | | | | |
|  | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| **PERSONAL DETAILS OF PLAYER** | | | | | | | | | | | | |
| Name | |  | | | | | Age / Date of birth | |  | | | |
| Address & Postcode | |  | | | | | | | | | | |
| Telephone | |  | | | | | | | | | | |
| Mobile | |  | | | | | | | | | | |
| Email | |  | | | | | | | | | | |
| Occupation | |  | | | | | | | | | | |
|  | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| **SPORTING EXPERIENCE INFORMATION** | | | | | | | | | | | | |
| Have you played cricket before: Yes No  *(Please write or type X in one box)* | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| **EMERGENCY CONTACT DETAILS** | | | | | | | | | | | | |
| As the person completing this form, you must ensure each person whose information you include in this form knows what will happen to their information and how it may be disclosed. | | | | | | | | | | | | |
| Name of an adult who can be contacted in an emergency | | | | | | Phone number of named adult | | | | Relationship which this person has with you | | |
|  | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| **PRIVACY STATEMENT** | | | | | | | | | | | | |
| Totton & Eling Cricket Club takes 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 (available from the club’s website) carefully to see how the Club will treat the personal information that you provide to us. | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| **CLUB PHOTOGRAPHY / VIDEO CONSENT** | | | | | | | | | | | | |
| I consent to the club photographing or videoing my 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. | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| **DISABILITY** | | | | | | | | | | | | |
| **We will use this information for statistical purposes as well as to establish if there are any additional needs / support / adjustments that your child may require, please discuss this with us.** | | | | | | | | | | | | |
| 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’. | | | | | | | | | | | | |
| Do you have any physical or mental health conditions or illnesses that have lasted or are expected to last 12 months or more? Yes No | | | | | | | | | | | | |
| Does this disability or illness affect you in any of the following areas? | | | | | | | | | | | | |
| Vision impairment  Hearing impairment  Mobility impairment  Dexterity impairment  Learning impairment | | | | | Other type of impairment, please provide more details:  Mental Health impairment  Developmental impairment  Memory impairment  Stamina, Breathing or Fatigue impairment | | | | | | | |
|  | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| **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 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. | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| **PLAYER PARTICIPATION AGREEMENT:** | | | | | | | | | | | | |
| I agree to take part in the activities of the club.  I confirm I have read, or have been made aware of, the club’s policies concerning (available via <https://tottonandelingcc.co.uk/welfare-accreditation/>):   1. Changing & showering 2. Transporting children 3. Photograph & filming young people 4. Bullying 5. Interactive Technology, Social Media, E-Safety   I understand and agree to the responsibilities which I have regarding these policies | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| **PLAYER AGREEMENT** | | | | | | | | | | | | |
| By returning this completed form, I confirm that I have read and understood the permission statements on this membership form and the documents listed here (which are available from the club’s website):   1. Totton & Eling Cricket Club Privacy Notice 2. Adult Player Social Membership Form (please complete) 3. Social Membership Benefits, Types, Rules & Regulations 4. Code of Conduct for Members & Guests   I hereby agree to abide by the Constitution, Policies & Rules of Totton & Eling Cricket Club. | | | | | | | | | | | | |
| Signature: |  | | | | | | | | Date: | |  | |