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

***For club players under the age of 18***

All forms should be completed in full and returned with the appropriate payment to  
**Alex Presland (Jnr Secretary –** [**junior.membership@tottonandelingcc.co.uk**](mailto:junior.membership@tottonandelingcc.co.uk)**)** by **Friday 29 April 2022**

The junior membership subscription covers the following for one season:

* All weekly outdoor training sessions (weather permitting)
* Non-voting membership of the club for parent(s) / carer(s) / guardian(s)
* Parents’ / Carers’ / Guardians’ Social Membership of Totton & Eling Cricket Club Events Ltd

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| **JUNIOR MEMBERSHIP RATES 2022** | | | | | | | | | | | | | |
| **Please select ONE membership rate from the list below by placing a ‘X’ in the box to the right:** | | | | | | | | | | | | | |
| **First Child** | | | £85 subscription fee | | | | | | | Match fees payable £2 per match (£5 per match in adult league games and £3 in adult friendlies) | | |  |
| **Subsequent Child (at same address)** | | | £65 subscription fee | | | | | | | Match fees payable £2 per match (£5 per match in adult league games and £3 in adult friendlies) | | |  |
| 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) | | | | | | | | | | | | | |
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| **PERSONAL DETAILS OF JUNIOR PLAYER** | | | | | | | | | | | | | |
| Name | |  | | | | | | | Age / Date of birth | |  | | |
| Home address & Postcode | |  | | | | | | | | | | | |
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| **PERSONAL DETAILS OF PARENTS / CARERS / LEGAL GUARDIANS OF PLAYER** | | | | | | | | | | | | | |
| Name(s) | | | | | | | Home address, including postcode (if different) | | | | | | |
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| Email address(es): | | | | | |  | | | | | | | |
| Telephone number(s): | | | | | |  | | | | | | | |
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| **SPORTING EXPERIENCE INFORMATION** | | | | | | | | | | | | | |
| Has your child played cricket before: Yes No  *(Please write or type X in one box)* | | | | | | | | | | | | | |
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| **CLUB PHOTOGRAPHY / VIDEO CONSENT** | | | | | | | | | | | | | |
| I consent to the club photographing or videoing (name of child) 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. | | | | | | | | | | | | | |
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| **EMERGENCY CONTACT DETAILS** | | | | | | | | | | | | | |
| ***Can we use the above details as a contact in an emergency? If not please provide the contact details of an alternative adult below.***  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 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) | | |
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| **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 | | | | | | | | |
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| **PRIVACY STATEMENT** | | | | | | | | | | | | | |
| Totton & Eling Cricket Club takes the protection of the data that we hold about you and our Junior members 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. | | | | | | | | | | | | | |
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| **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. | | | | | | | | | | | | | |
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| 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. | | | | | | | | | | | | | |
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| **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 club’s policies concerning (available via <https://tottonandelingcc.co.uk/welfare-accreditation/>):   1. Changing & showering 5. Missing children 2. Transporting children 6. Playing in open age (senior) matches 3. Photography & video filming 7. Bullying 4. Managing children 8. Interactive Technology, Social Media, E-Safety   I understand and agree to the responsibilities which I and my child have regarding these policies  I also confirm I have been given comprehensive details of the home and away fixtures in which my child may participate | | | | | | | | | | | | | |
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| **PARENT/GUARDIAN AGREEMENT** | | | | | | | | | | | | | |
| By returning this completed form, I confirm that I have legal responsibility of the child named above and 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. Junior Parents Social Membership Form (please complete) 3. Social Membership Benefits, Types, Rules & Regulations 4. Code of Conduct for Members & Guests 5. Code of Conduct for Young People   I hereby agree to abide by the Constitution, Policies & Rules of Totton & Eling Cricket Club. | | | | | | | | | | | | | |
| Signature: |  | | | | | | | | | | Date: |  | |