



Wisborough Green Cricket Club : Colts Registration Form 2011

PERSONAL DETAILS FOR PLAYER AND PARENT/LEGAL GUARDIAN

Name of Child.....

Child's Date of Birth.....SchoolSchool year

Name of Parent or Legal Guardian.....

Address

Post Code..... Home Telephone Number

Email addresses

Mobile telephone numbers for parents / guardians.....

EMERGENCY CONTACT DETAILS

In the event of an incident or emergency situation, where a parent or legal guardian named above cannot be contacted, please provide details of an **alternative** adult who can be contacted by the Club. Please make this person aware that his or her details have been provided as a contact for the Club.

Name of an alternative adult who can be contacted in an emergency

Phone number for alternative named adult..... Relationship to Child

DISABILITY

Do you consider this child to have a disability? Yes/ No

If yes, please give details.....

MEDICAL INFORMATION

Please detail below any important medical information that we need to know about (e.g. allergies, medical conditions, current medication, special dietary requirements, injuries)

.....

Surgery NameDoctor Name

Doctor's Telephone number.....

ASSISTANCE

Please could you indicate whether you would be prepared to assist with any of the following, either on an occasional or regular basis :

- | | |
|--|---|
| <input type="checkbox"/> Assist with coaching | <input type="checkbox"/> Helping with refreshments |
| <input type="checkbox"/> Assist with umpiring | <input type="checkbox"/> Assist with fundraising |
| <input type="checkbox"/> Assist with scoring | <input type="checkbox"/> Help with club administration |
| <input type="checkbox"/> Assist with setting up and putting away | <input type="checkbox"/> Help with Management of the club |



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DECLARATION BY PARENT /GUARDIAN

I confirm that I have legal responsibility for and am entitled to give this consent.

I confirm that to the best of my knowledge, all information provided on this form is accurate, and that I will undertake to advise the club of any changes to this information.

I agree to the child named above taking part in the activities of the club. I give my consent that in an emergency situation, the Club may act in loco parentis, if the need arises for the administration of emergency first aid and / or other medical treatment which in the opinion of a qualified medical practitioner may be necessary. I also understand that in such an occurrence that all reasonable steps will be taken to contact me or the alternative adult whom I have named in this form.

I have provided the details above and understand that we are responsible for ensuring that our child/children are taken to his/her coach for training and collected promptly at the end of the session for the age group. I am aware that we are responsible for transporting or organizing transport for our child/children to and from matches and will ensure that the coaches are informed of arrangements. I/We undertake to pay as indicated above for membership to continue. I also agree to be bound by the Terms and Conditions of the Club's affiliation with the ECB and to Leagues that our child/children may be also involved in.

It is the parent's/guardian's responsibility to ensure that their child is/children are handed over to the allocated manager and collected promptly from the manager . There may be occasions when training for an age group may be cancelled due to unforeseen circumstances and this will ensure that children are not left unattended and unsupervised on club grounds for which the club will not accept any liability.

Parent/Guardian Name:Signature.....Date

MEMBERSHIP FEES

- Under 6 : £10 per player – includes a free club hat
- Under 8 : £20 per player – includes a free club hat
- Under 10 : £25 per player – includes a free club hat
- Under 12 – Under 16 : £25 per player . Hat will be made available at a reduced rate

Wisborough Green Sports association membership: £10.00 per family

Please note that there will also be a nominal match fee to cover Tees for every home game.

Please note that no player will be allowed to participate in any event or match undertaken by the club until payment of membership fees have been received.

Please return this form to : Teresa Penfold

Club use								
Date Paid		Payment details						
Age Group	Under 6	Under 8	Under 10	Under 12	Under 13	Under 14	Under 15	Under 16