

PLAYER NAME:



LOUGHTON CRICKET CLUB JUNIOR MEMBERSHIP FORM 2019

Welcome to Loughton Cricket Club. This junior membership form should be completed by the parent or legal guardian of any player under the age of 18. Please complete this form and return it to a club coach, team manager or Welfare Officer. It will then be passed on to the club's Junior Welfare Officer for secure keeping in line with our data protection guidelines outlined below.

Data protection

We are committed to meeting new European legislation regarding data protection enshrined in the General Data Protection Regulation (GDPR). This means we will maintain the appropriate confidentiality, integrity and security of personal data that we process by complying with both our legal and ethical obligations in respect of data protection and privacy.

The Club will use the information provided on this form (together with other information it obtains about the player) (together 'Information') to administer the player's cricketing activity at the Club and in any activities in which he/she participates through the Club; to care for and supervise activities in which he/she is involved; and to keep you informed about club events. In some cases this may require the Club to disclose the Information to County Boards, Leagues and to the England and Wales Cricket Board.

In the event of a medical issue or child protection issue arising, the Club may disclose certain information to doctors or other medical specialists and/or to police, children's social care, the Courts and/or probation officers and, potentially, to legal and other advisers involved in an investigation.

As the person completing this form, you must ensure that each person whose information you include in this form knows what will happen to their information and how it may be disclosed.

OUR CLUB

Since its foundation in 1879, our club has been built on three key principles:

1. We are a club of members, not just players. Members are expected to contribute to the overall well-being of the club both on and off the pitch.
2. All members – adult and junior – pay an annual subscription and match fees to help meet the club's year-round running costs. Non-playing parents/carers of juniors are granted associate membership of the club free of charge which confers all benefits of membership, excluding the right to vote for team captains.
3. Everyone involved in running the club is a volunteer who donates their time and skills freely for the benefit of others. All members are expected to make their own contribution.



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Junior Membership 2019:

Boys £50 Additional sibling £25 - Any Additional siblings are free

Girls £30 Additional sibling £15 - Any Additional siblings are free

All Junior Memberships include 2 Adult Honorary Social Memberships

****Age is based on the individual's age at 31st August 2018****

Payment Methods:

There are 3 ways to pay Junior Memberships subscription fees:

Cheque: Please make Cheques payable to
LOUGHTON CRICKET CLUB and send to:
C/O Cliff Greenhill or Ben Notley-Griffiths
99 The Lindens
Loughton, Essex
IG10 3HT

Cash: Must only be paid in person. Please make sure you receive a receipt from the club official you have paid.

Bank Transfer: Payments made by Bank Transfer must be noted below, with the relevant reference and date paid:

Account Name: Loughton Cricket Club
Sort Code: 40-30-25
Account Number: 70545279

Date Paid:

Reference: *(Must include age group, eg Under 11s)

NB: Any electronic Payments that cannot be clearly identified will be forfeit

If there are circumstances that make paying this amount difficult, please contact one of the below:

Cliff Greenhill	<i>Chairman</i>	cliff.greenhill@btinternet.com
Ben Notley-Griffiths	<i>Colts Coordinator</i>	ben@notleygriffiths.com
Rohail Anwar	<i>Treasurer</i>	rohail_anwar@hotmail.com



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Section 1 Child Details	Name of Child (under 18)	Child's Date of Birth & Age	Child's School and School Year	
	Name and Contact Details of Parent/Guardian Home address:		Name and Contact Details of Parent/Guardian Home address:	
	Daytime Phone:	Evening Phone:	Daytime Phone:	Evening Phone:
	Mobile Phone:		Mobile Phone:	
	Email Address:		Email Address:	
Section 2 Emergency Contact Details	<i>In the event of an incident or emergency where a parent or legal guardian named above cannot be contacted, please provide details of an <u>alternative</u> 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.</i>			
	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 (e.g. aunt, neighbour, family friend etc.)	
Section 3 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 the young player have and physical or mental health conditions or illnesses that have lasted or are expected to last 12 months or more? <input type="checkbox"/> Yes <input type="checkbox"/> No			
	Does this disability or illness affect the young player in any of the following areas:			
	<input type="checkbox"/> Visual impairment <input type="checkbox"/> Hearing impairment <input type="checkbox"/> Mobility Impairment <input type="checkbox"/> Dexterity Impairment <input type="checkbox"/> Learning Impairment <input type="checkbox"/> Memory Impairment <input type="checkbox"/> Mental Health Impairment <input type="checkbox"/> Stamina, Breathing or Fatigue Impairment <input type="checkbox"/> Development Impairment <input type="checkbox"/> Any other Impairment (please provide details):			
Section 4 Sporting Information	Has this child played cricket before? <input type="checkbox"/> Yes <input type="checkbox"/> No			
	If yes, where has this been played?			
	<input type="checkbox"/> Primary school <input type="checkbox"/> Secondary school <input type="checkbox"/> Local authority coaching session(s) <input type="checkbox"/> Club <input type="checkbox"/> County <input type="checkbox"/> Special Educational Needs School <input type="checkbox"/> Other (please specify):			
Section 5 Medical	Please detail below any important medical information that our Coaches need to know (e.g. allergies, medical conditions, current medication, special dietary requirements, injuries)*			
	<i>*Please indicate if you would like to discuss this privately</i>			
	Name of Doctor	Surgery Name	Doctor's Telephone Number	



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Consent Statement from Parent/Legal Guardian

Please tick each box where you agree (or delete if you do not agree)

Legal authority to provide consent:

- I confirm that I have legal responsibility for _____ (name of child) 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.

Consent to participate:

- I agree to the child named above taking part in the activities of the Club.

Medical consent:

- 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, all reasonable steps will be taken to contact me or the alternative adult I have named in section 2 of this form.
- I confirm that to the best of my knowledge, my child does not suffer from any medical condition other than those detailed by me in section 5 of this form.
- I consent to the young player's medical details to be shared with coaches/leaders for the purposes of the delivery of the young player's safe participation in cricket club activity.
Not providing consent will not affect the young player's membership of the Club, however giving us consent to share this information will help club volunteers to know how to respond effectively in the case of medical emergency.
- I confirm I have read, or been made aware of, the following Club policies which are published in the annual membership booklet and posted in the clubhouse:

- | | |
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| <ul style="list-style-type: none"> <input type="checkbox"/> changing/showering <input type="checkbox"/> transport <input type="checkbox"/> photography, filming and social media <input type="checkbox"/> managing children away from the club | <ul style="list-style-type: none"> <input type="checkbox"/> missing children <input type="checkbox"/> children playing in adult matches <input type="checkbox"/> anti-bullying and code of conduct |
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- I understand and agree to the responsibilities which I and my child have in connection with these policies.
- I consent to the Club photographing or videoing my child's involvement in cricket under the terms and conditions in the Club photography, filming and social media broadcast policy.
[NOTE: THIS BOX SHOULD BE LEFT UNTICKED IF YOU DO NOT AGREE]
- I confirm I have been given full information about the cricket activities in which my child may participate.

Signed (Parent/Legal Guardian):	Date:
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Consent from Child in connection with club photography/video policy (for players aged 12-18)

Please indicate if you DO or DO NOT agree with the statement below:

- I consent to the Club photographing or videoing my involvement in cricket under the terms and conditions in the Club photography, filming and social media broadcast policy.
[NOTE: THIS BOX SHOULD BE LEFT UNTICKED IF YOU DO NOT AGREE]

Signed (by Child if 12 years or older):	Date:
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