

ROWLEDGE CRICKET CLUB

Youth/Junior Membership/Consent Form 2011

Section 1 Please complete an entry for EACH youth / child under 18 years old

	Name	Date of birth	
Youth/child 1			M / F
Youth/child 2			M / F
Youth/child 3			M / F
Youth/child 4			M / F

Emergency contact details: tel nos / contact names - parent / guardian

(Optional) If possible, a number of an alternative adult (state relationship)

Section 2 Consent statement from Parent / Legal guardian **Please tick each box where you agree**

I confirm that I have legal responsibility for all the above the youths / children and am entitled to give consent

I confirm that to the best of my knowledge all information above is accurate

I agree that the youths / children listed above can take part in club activities, including home and away games

I confirm that I have read, or been made aware of, all the club's policies and guidelines and that I agree to them on behalf of myself and the youths / children above

**All Club Policies, Codes of Conduct and Guidelines can be found on the RCC Website
www.rowledgecricketclub.com**

Section 3 Medical information

Please list below any important medical information that our coaches need to know and the youth's / child's name
(Use reverse of form if further space required)

Medical Consent : I give my consent that in an emergency situation, the Club may act in loco parentis for the administration of emergency first aid, which in the opinion of a qualified medical practitioner may be necessary. The Club will take reasonable steps to contact the Parent or Guardian.
Please supply doctor's name / tel number if possible

Section 4 Disability

The Disability Discrimination Act 1995 defines a disabled person as anyone with a physical or mental impairment which has a substantial and long term adverse effect on his/ her ability to carry out normal day to day activities

Do you consider any youth / child listed above to have a disability? Please circle Yes / No Yes No

If yes, please list youth's / child's name and circle nature of disability

Visual impairment Physical disability
Hearing impairment Learning difficulties
Other

Signed: Parent / Legal Guardian

Print Name

Date

Section 5 Consent from players of 12-18 years old in respect of Photography Policy

I consent to the Club's photoing / videoing of my involvement in cricket under the policy/guidelines listed above. Please circle Yes / No Yes No

Signed: (Youth / child if 12 years or older)

Date