



## COLTS CRICKET 2018 – MEMBERSHIP FORM

Please return completed membership form to KGCC by 16 March, by email or hard copy.  
Address: KGCC, c/o Gomms Wood Lodge, Cherry Drive, Forty Green, Bucks. HP9 1XP.  
Email: [kerri.mcleish@hotmail.co.uk](mailto:kerri.mcleish@hotmail.co.uk)

**Data Protection:** KGCC will use the information provided on this form, as well as, other information it obtains about the player (together “Information”) to administer his/her cricketing activity at the club, and in any activities in which he/she participates through the club, and to care for, and supervise, activities in which he/she is involved. In some cases this may require the club to disclose the information to County Boards, leagues and to the ECB. In the event of a medical or child safeguarding 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 each person whose information you include in this form knows what will happen to their information and how it may be disclosed.*

### Section 1: Personal Details for Colt and Parent/Legal Guardian

Name of Colt	Date of Birth #	School

# Must be aged 6 to 15 on 31<sup>st</sup> August 2017 (i.e. in years 2 to 11 incl. at school).

<b>Name of parent / legal guardian</b>	
<b>Home address</b>	
<b>Home tel. no.</b>	
<b>Mobile tel. no.</b>	
<b>Email</b>	

### Section 2 – Subscriptions

The subscriptions for full membership are:

- £80 for the first Colt in a family, which includes social membership for a parent/legal guardian
- £60 for subsequent siblings

*(Please note: in addition to subs, each child selected to play in matches will be charged match fees of £2.50 per match, to cover costs)*

Please complete the following as appropriate to indicate payment method:

I enclose a cheque (payable to KGCC) / I have made a bank transfer (a/c 60646616, sort code 60 02 09) for £ \_\_\_\_\_



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### Section 3: Emergency Contact Details

In the event of an incident or emergency situation, where a parent or legal guardian 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.

<b>Name of <i>alternative</i> adult</b>	
<b>Relationship to Colt</b>	
<b>Home address</b>	
<b>Home tel. no.</b>	
<b>Mobile tel. no.</b>	
<b>Email</b>	

### Section 4 - 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’.	
Do you consider this child to have an impairment?	
If yes, what is the nature of their disability? (Visual impairment; hearing impairment; physical disability; learning disability; multiple disability; other - please specify)	

### Section 5 – Medical Information

Please detail below, any important medical information that our coaches/Colts co-ordinator need to know, such as allergies; medical conditions (e.g. epilepsy, asthma); current medication; special dietary requirements, any additional needs, and/or any injuries. Please indicate if you would like to discuss this privately with us.	
<b>Name of Doctor/Surgery</b>	
<b>Doctor’s telephone no.</b>	



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### Section 6 – Consent

KGCC follows “Safe Hands”, the ECB rules for managing the welfare of our Colts - <http://www.ecb.co.uk/ecb/safeguarding-and-protecting-children/>

I confirm I have legal responsibility for \_\_\_\_\_ and am entitled to give this consent. I confirm to the best of my knowledge, the information provided on this form is complete and accurate, and I will undertake to advise the club of any changes to this information.

#### **Mandatory Consents**

*Please note: KGCC cannot accept as members of the club a child whose parent/legal guardian does not consent to the ‘mandatory consents’ below.*

#### Medical consent:

I give my consent that in an emergency situation, the Club may act in my place (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 three of this form.

I confirm to the best of my knowledge, my child/the child(ren) in my care does not suffer from any medical conditions other than those detailed by me in section five of this form.

#### Consent to participate:

I agree to the child(ren) named above taking part in the Colts cricket activities of the club.

#### Confirmation of acceptance of welfare policy:

I confirm I have read and accept the club’s Welfare policy (<http://www.knottygreencricketclub.uk/child-welfare/>), which covers anti-bullying, changing / showering, photography / video, transporting children, managing children away from the club, missing children, social media, text and email, playing in adult matches, wearing of protection and codes of conduct for parents and carers, and club members and guests.

I understand and agree to the responsibilities that my child(ren) and I have in connection with these policies

#### **Optional consents referred to in the welfare policy:**

I consent to the club photographing or videoing the involvement of the child(ren) named above in cricket under the terms and conditions in the club photography/video policy.

*Please delete as appropriate:*

The child(ren) named above will change at home / may change at the club / may only change under supervision

SIGNED

(Parent/Legal Guardian)

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PRINT

(Parent/Legal Guardian)

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DATE

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