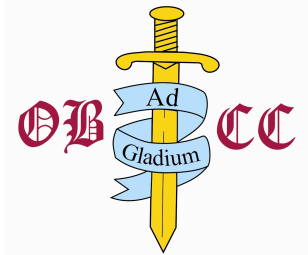


Ockbrook & Borrowash Cricket Club

Founded 1850

Members of the Derbyshire Premier & County Leagues



Junior Application Form

This form is to be completed by the Parent or Legal Guardian of any player under the age of 18. It should be signed by the player themselves.

Once completed, the form should be returned to Isobel Howe, Junior Treasurer

Data protection. The Club will use the information provided on this form (together with other information it contains about the player) to administer his/her cricketing activity at the Club and in any activities in which he/she participates through the Club and to care 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 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 advisors involved in any investigation.

Section 1 Personal details for young players and their Parent/Legal Guardian

Name of Child (under 18)	Childs Date of Birth	Name of Parent or Legal Guardian
Home address	Postcode	Email address Alternative email address
Home telephone number	Mobile telephone number for parent/guardian	Players mobile number

Section 2 Emergency contact details

In the event of an incident or emergency situation, where a parent or 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 which this person has to the child
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Section 3 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 or her ability to carry out normal day-to-day activities”.

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

If yes, what is the nature of their disability?

- Visual impairment Learning disability other (please specify)
 Hearing impairment Multiple disability
 Physical impairment

Section 4 Sporting Information

Has this child played Cricket before? Yes No

If yes, where has this been played?

- Primary school Club other (please specify)
 Secondary school County
 Local authority coaching session(s)

Name of School

Section 5 Medical Information

Please detail below any important medical information that our Coaches need to know (e.g. allergies, medical conditions, current medication, injuries)

- Epilepsy Diabetes Heart Condition
 Allergies Respiratory Disorder Inhaler
 Dizzy Spells Other (please explain below)

Name of Doctor/Surgery Name

Doctors Telephone Number

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 the 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 that all reasonable steps will be taken to contact me or the alternative adult which 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 confirm I have read, or been made aware of , the club's policies concerning
- changing/showering
 - transport
 - photography/video
 - managing children away from the club
 - missing children
 - children playing in adult matches
 - Anti bullying and the code of conduct
 - E Safety Policy

(copies available from Jane Hough, Club Welfare Officer, 07891 769146)

I understand and agree to the responsibilities which I and my child have in connections 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/video policy. (NOTE: THIS BOX SHOULD BE LEFT UNTICKED IF YOU DO NOT AGREE)

I also confirm I have been given comprehensive details of the home and away fixtures in which my child may participate

Signed (parent/Legal Guardian)

Date

Printed name of Parent/legal Guardian who has completed this form:

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/video policy (NOTE THIS BOX SHOULD BE LEFT UNTICKED IF YOU DO NOT AGREE)

Signed (Child is 12 years or older)

Date

Offer of Help

Without your help and support we are unable to run the Junior Section of OBCC, please indicate below where you would like to help

	Please √ as applicable	Past experience (not necessary)	Training required
Coaching			
Support at matches			
Administration			
Transport			
Sponsorship			
Applying for Funding/Grants			
Bar			
Ground			
Other			
Website Development			