

**Ethnicity** 

# JUNIOR REGISTRATION FORM 2013/2014 Season

Please complete this form electronically and email to <u>juniors.reg@guildfordhc.com</u>

All Junior Players in a family can be entered in the same form. Printed forms may be sent to the postal address in the payment section.

JUNIOR MEMBER(S) PARENT / GUARDIAN	DETAILS
Mother's Name	Mobile Number
Father's Name	Mobile Number
Address	
Post Code	Home Phone
Parent email address I (required)	
Parent email address 2 (optional)	
Family Doctor Name	Phone Number
Family Doctor Surgery	
Another contact in case of emergency (in the case	that a parent is unreachable):
Name	Phone Number
Relationship to Player	Phone Number
ease note that it is GHC policy not to collect or store contact details of anyon parents/guardians. Also note that all information is kept confidential and only	ne under 18 years old, so please only include phone numbers and email addres given to officers of the Club who need to to carry out their Club duties.
JUNIOR MEMBER DETAILS & MEDICAL INFORMATION	
Last Name	First Name
Birth date	Age on 1 September 2013
School	Gender
Please list any allergies including to medication	
Please list any regular medication the player is taking	
Please detail any long term illnesses or injuries	
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The following information is used for development	purposes only:

Disability

Please skip to the Additional Information and Policy sections on the bottom of the next page if you do not need to complete details for more than one player in your family.

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### **ADDITIONAL INFORMATION**

Please include any other information about your Junior Player(s) you feel Guildford Hockey Club should know that you have not had opportunity to include on this form.

# **GUILDFORD HOCKEY CLUB POLICIES RELATING TO JUNIOR PLAYERS**

## **Photography**

Photographs and/or video may be taken during matches and training sessions by approved agents and officers of Guildford Hockey Club. Such images shall be used for publicity and training purposes in accordance with the Guildford Hockey Club Safeguarding and Protecting Young People Policy and Photography Policy.

By signing this form, you consent for your child to feature in such images which may be used by agents and officers of the Club for marketing purposes, eg local newspapers, magazines, promotional articles including flyers and brochures and the Club's website.

# Transportation & Handover

Parents/carers are responsible for making their own arrangements to get their child to and from matches and training sessions. It is the parent/carer's responsibility to ensure that the Junior Player is handed over to/collected from a Guildford Hockey Club officer for training sessions and matches.

### **All Junior Policies**

All Club Policies relating to Junior Members are available on the Club's website:

http://www.guildfordhc.com/childprotection.html

Please ensure that you read these policies with your Junior Player(s). By signing this form below you agree to adhere to these policies.

### **GET INVOLVED - SHAREYOUR SKILLS**

We are always looking for members who would like to get involved in continuing to make Guildford Hockey Club a "great place to play." Please let us know what skills or interests you have that you might like to share with the Club (no previous knowledge of hockey required!), eg, fundraising, catering, surveyor, builder, photography, accounting, marketing, ...

### JUNIOR MEMBERSHIP SUBSCRIPTION FEES

Junior membership fees for the 2013/2014 Season are £140 per Junior Player + a Social Membership fee of £20 per family. The Social Membership ensures that the Junior Members' non-playing family members are included in the Club's insurance policy therefore allowing them access to the grounds and clubhouse. It also includes an entry into the 300 Club draw for a chance each month at winning. We encourage Parents of junior members to participate in and enjoy the social activities of the Club.

Junior Member + Family Social Membership

Additional Junior Member

Additional Junior Member

Additional Junior Member

Total Owing

New members are offered 4 trial sessions before committing to the season's fees. Please indicate the intended start date for trial sessions if you so wish:

**Returning members** and new members not requiring trial sessions:

We prefer that payments are made using BACS.

Please put your player's surname and age group as a reference:

**GUILDFORD HOCKEY CLUB** 

Sort code: 40-22-26 Account: 7265 1637

If you must pay by cheque – please make the cheque payable to Guildford Hockey Club and send to: Jeremy Holt

126 Guildford Park Avenue Guildford GU2 7NN

If you have difficulty with financing, please contact treasurer@guildfordhc.com to arrange a payment scheme.

### CONSENT

I consent to the above named Junior Player(s) joining Guildford Hockey Club.

Name Relationship to Child

Date Please re-type your name to 'sign' this form