

SHENLEY SCORPIONS BASKETBALL CLUB

MEMBERSHIP FORM 2016/17

New Member []

Returning Member []

PLEASE ATTACH

- 1 Passport Photo
- Birth certificate (photocopy)
- Registration Fee £20 (if new)

AGE GROUP			
<input type="checkbox"/> Minis (Years 2 and under)	<input type="checkbox"/> Under 10's (Years 3 - 4)	<input type="checkbox"/> Under 12's (Years 5-7)	<input type="checkbox"/> Under 14's (Years 8-9)
<input type="checkbox"/> Under 16's (Years 10-11)	<input type="checkbox"/> Under 18's (Years 12-13)		

FORENAME (PRINT IN CAPITALS):

SURNAME (PRINT IN CAPITALS):

ADDRESS:

POSTCODE:

EMAIL ADDRESS:

HOME TELEPHONE NUMBER:

EMERGENCY TELEPHONE NUMBER:

MEDICAL INFORMATION/MEDICATION:

DATE OF BIRTH:

SCHOOL:

SCHOOL YEAR:

EQUALITY MONITORING DATA:

ETHNICAL ORIGIN (PLEASE TICK BOX)

White	Mixed	Black	Asian	Other
<input type="checkbox"/> British	<input type="checkbox"/> White & Black Caribbean	<input type="checkbox"/> Caribbean	<input type="checkbox"/> Indian	<input type="checkbox"/> Chinese
<input type="checkbox"/> Irish	<input type="checkbox"/> White & Black African	<input type="checkbox"/> African	<input type="checkbox"/> Pakistani	<input type="checkbox"/> Other
<input type="checkbox"/> Other	<input type="checkbox"/> White & Asian	<input type="checkbox"/> Other	<input type="checkbox"/> Bangladeshi	<input type="checkbox"/> Do not wish to disclose
	<input type="checkbox"/> Other		<input type="checkbox"/> Other	

CONSENT:

I hereby agree that Shenley Scorpions Basketball Club may occasionally take photos and video recordings at games and training sessions in the interests of player and club development and for promotional purposes.

I hereby agree that in order to keep me informed of club news Shenley Scorpions Basketball Club may contact me via email

I hereby agree that if my child requires urgent medical treatment and it is not possible to contact me or my partner, a member of the Shenley Scorpions staff is authorised to give consent on my behalf

I hereby agree that I will collect my child promptly at the end of the training session, from the training hall (all under 12s or younger)

Signed:.....(parent/Guardian if under 18)

Print.....Date.....