



Yate Hockey Club – JUNIOR Membership Registration Form

Club details can be found on www.yatehockey.com

All prospective members of Yate Hockey Club are required to complete this registration form and return it with payment prior to selection for the league season. All details will be kept in a secure database with access restricted to authorised club officers only

SECTION 1: MEMBER CONTACT INFORMATION

TITLE	FULL NAME
ADDRESS 1	DOB
ADDRESS 2	
TOWN	
POST CODE	EMAIL ADDRESS FOR CONTACT
SCHOOL ATTENDED	

SECTION 2: MEMBERSHIP TYPE

JUNIOR MEMBERSHIP	X	PAYMENT CHEQUE	BANK TRANSFER
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Junior membership fees £90 for Full Year when paid by end September. OR TWO payments of £50 payable End September and January payment.

Preferred payment method direct transfer/SO to HSBC sort code 40-14-13, account number 02012715 using your child(ren) names as reference or by cheque payable to Yate Junior Hockey Club.

Please advise Welfare Officer/Coach if there are any issues regarding the payment of the annual membership.

SECTION 3: MEDICAL INFORMATION & CONSENT

(To be completed by PARENT or GUARDIAN if under 18)

In case of emergency and as part of the clubs responsibility to its membership, ALL club members are required to complete this medical information form as accurately as possible. Details will be held securely with access restricted to authorised club officers only.

NEXT OF KIN	RELATIONSHIP	MOBILE	HOME TELEPHONE
DOCTORS NAME	SURGERY	SURGERY TELEPHONE	

As far as you aware, are you allergic to any drugs? (Please State)

Are you taking any regular medication? If so for what reason?

Do you have any long term illness or injuries?

Declaration: I consider my son / my daughter* to be physically fit and capable of full participation and agree to notify the club of any changes to the medical information provided. Furthermore, in the event that my son/daughter* are injured I give my permission for the team managers/coaches appointed by Yate Hockey Club to obtain emergency medical treatment on my behalf. (*delete as necessary)

SIGNED

RELATIONSHIP	DATE

SECTION 4: UNDER 18 MEMBER CONSENT (**TO BE COMPLETED BY PARENT/GUARDIAN**)

It is a requirement of club policy that parental consent is provided for participation, transportation and photography. The Yate Hockey Club members Code of Conduct and Safeguarding and Protecting Young People in Hockey Policy are available in the club handbook.

Please delete as appropriate where indicated by a * then sign and date at the bottom.

TRANSPORTATION:

I consent to my son/daughter* travelling to venues for matches and training by transport provided by the club which may include travelling in other players private cars.	YES/NO

PHOTOGRAPHY:

In some environments, particularly adult competition it is impossible to control photography by external parties, however, I am aware that there may be times that photographs and/or footage may be taken during matches and training sessions by approved agents and/or officers of Yate Hockey Club. Such images shall only be used for publicity/training purposes in accordance with the Yate Hockey Club Safeguarding and Protecting Young People in Hockey Policy and Photography Policy and give consent for my son/ daughter to feature in such photos/ images. I hereby only grant approved agents the right to use the images resulting from the photo/film shoots. This includes any reproductions or adaptations of the images for all general purposes ie local newspapers, local magazines, other promotional articles (inc. flyers) and the club's website.

I consent for photographs with (or without) forenames & surnames to be put up in the clubhouse at the Yate Outdoor Sports Complex.	YES/NO
I consent for photographs with forenames & surnames to be used in match reports submitted to local newspapers.	YES/NO
I consent to photographs (no names) to be used on our web site www.yatehockey.com	YES/NO
I fully understand that it is my responsibility to ensure that my child registers at each training session and that Yate Hockey Club is only responsible for my child during each training session for which my child has registered and at matches when representing the Club.	
SIGNED	
RELATIONSHIP	DATE
NAME OF PARENT/GUARDIAN	
CONTACT DETAILS OF PARENTS/GUARDIAN including emergency contact details	

SECTION 5: ETHNICITY & DISABILITY

(Whilst it is not compulsory for the following sections to be completed, the paragraph below explains why this personal information is considered to be important)

Sport can and does play a major role in promoting the inclusion of all groups in society. However, inequalities have existed within sport particularly in relation to gender, race and disability. Sport England and England Hockey are committed to promoting and developing sports equity, which is about fairness in sport, equality of access, recognising inequalities and taking steps to address them. By monitoring the profile of people in sports clubs, national governing bodies of sport and Sport England can identify any issues relating to under representation of different groups and can develop strategies to ensure that all people have the opportunity in the future to develop and progress in sport. England Hockey requests this data from clubs as part of the annual affiliation process and completing this data accurately enables the club to give an accurate picture to England Hockey on our membership.

PLEASE TICK THE BOX THAT BEST DESCRIBES YOUR ETHNICITY

ETHNICITY OF CLUB MEMBERS					
	TICK BOX		TICK BOX		TICK BOX
White British		Mixed -White and Asian		Asian or Asian British – Other	
White Irish		Mixed - Other		Black or Black British – Caribbean	
White Other		Asian or Asian British		Indian Black or Black British-African	
Mixed – White and Black Caribbean		Asian or Asian British - Pakistani		Black or Black British – Other	
Mixed – White and Black African		Asian or Asian British - Bangladeshi		Chinese	
Other Ethnic Group					

PLEASE TICK TO INDICATE ANY LEARNING OR PHYSICAL DISABILITIES

DISABILITY					
	TICK BOX		TICK BOX		TICK BOX
Deaf		Physical Disability		Visually impaired	
Hearing impaired		Learning Disability		Hearing impaired	
Multiple Disability		Other – please specify			

Please add any additional relevant information:

Please let us know how you hear about us:

To ensure that we have the correct contact details for you, please complete the information requested below and return the form to your team captain or another member of the club committee. This information will be used to keep you informed about Club events and to contact you in the event of an accident or incident. Some of the information is required to comply with the England Hockey Equity Policy, which has been adopted by the Club.

Please note that Yate Hockey Club is insured for employers liability and third party damage only. Yate Hockey Club will not be held responsible or accountable for any damage or injury incurred by a club member whilst a club member is playing, training or undertaking any other activity organised by Yate Hockey Club.