

# Sittingbourne Rugby Union Football Club

## JUNIOR MEMBERSHIP FORM 2008/2009 (v1.7)

Memb No: 09 / /

Cash / Cheque

PLEASE COMPLETE ALL RELEVANT SECTIONS & RETURN WITH YOUR PAYMENT TO KEVIN SMITH, MEMBERSHIP SECRETARY

### PERSONAL DETAILS

Full Name: ..... Date of Birth: .....

Home Address: .....

Postcode: ..... Home Tel: ..... Mobile Tel. No: .....

E-mail Address: .....

Current School / College .....

Emergency Contact Name: ..... Relationship to Member: .....

Emergency Tel: .....

Medical Details: *Please give details of any condition, allergy or disability, which you feel we should be aware*

In order to help the club monitor its membership please tick one of the following boxes to identify your ethnic group:

White Mixed Asian /Asian British Black / Black British Chinese / Other ethnic group / Prefer Not to Say

### SUBSCRIPTIONS (Cheques payable to Gore Court Cricket Club, aka "GCCC")

Please tick relevant box and return payment with this form to Kevin Smith or your team manager to forward on.

Under 7 / U8 / U9 / U10 / U11 / U12 £13.00

Under U13 / U14 / U15 / U16 £30.00

Under 17 / U18 / Full-time Student £38.00

### PARENTAL INFORMATION (to be completed for all players under 18yrs)

**DECLARATION:** I would like my son/daughter to join the Mini / Junior rugby sessions organised by Sittingbourne RUFC. I understand that, whilst great care is taken to maintain the highest standards of safety during coaching sessions and matches, Sittingbourne RUFC or any of its members can accept no liability for any loss of property, accidents or injuries, of or to my son/daughter, howsoever caused

**CHILD PROTECTION:** I understand that Sittingbourne RUFC has appointed an officer in accordance with the guidelines produced by the RFU and our Policy is maintained in line with the current RFU recommendations. I confirm that I have read and understand the attached Guideline Documents.

**PHOTOGRAPHY:** I understand that team, training, and match photographs may be taken by persons appointed by Sittingbourne RUFC for publicity or coaching purposes (including publication on the club web site, local newspapers, etc). It is the Club's policy NOT to individually identify players.

**TRAVEL:** I give permission/do not give permission (*delete as appropriate*) for my son/daughter to travel with either the Coach or another adult and I realise that I must take full responsibility for his/her behaviour.

**MEDICAL PERMISSION:** In my absence I agree / do not agree (*delete as appropriate*) to emergency treatment arising from any incident, including an anaesthetic, if required, and have given full details of relevant medical conditions in the PERSONAL DETAILS section above.

Named Parent / Guardian: ..... (Full name) Occupation: .....

Signature: ..... Date: .....

### TERMS OF MEMBERSHIP

**DECLARATION:** In signing this form I hereby apply for membership of Sittingbourne RUFC (A section of Gore Court Cricket Club) and agree to adhere to the Club's Rules, Policies & Codes of Conduct. I understand that Officials, Players, Coaches Assistants & Referees must be fully paid up members to receive cover from the RFU Compulsory Insurance Policy (Death & Total Permanent Disability). The Club does not purchase cover for temporary disability or loss of earnings and it is recommended that members make their own arrangement for any such cover.

Signature: ..... Date: .....

**DATA PROTECTION ACT:** Sittingbourne RUFC is section of Gore Court Cricket Club, an unincorporated members club. The information provided on this form may be held additionally on a computer system. This data will only be made available to coaches and officers of the club for the sole purpose of administering club events & affairs.