

# Sittingbourne Rugby Union Football Club

## JUNIOR MEMBERSHIP FORM 2017/2018

### 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*

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

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

**SUBSCRIPTIONS** (Includes membership of Gore Court Cricket Club and Youth Rugby subscription; please make cheques payable to "Sittingbourne Rugby Club"; to pay by bank transfer pay Sort Code: 09-01-55 Account: 70968607 with reference age group ,initial and surname (e.g. U10 F Smith). Please tick the relevant box below)

How has payment been made: Cheque  Cash  Bank Transfer

Under 6  £30.00

Under 7  / U8  / U9  / U10  / U11  / U12  £70.00

Under 13  / U14  / U15  / U16  £90.00

Under 17  / U18  / Full-time Student  £100.00

### 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. I agree to abide by the Codes of Conduct for Parents and Spectators and other policies published on the Club website.

**SAFEGUARDING:** I understand 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 agree to abide by these guidelines.

**PHOTOGRAPHY:** I understand that team, training, and match photographs or videos 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 identify players individually. I understand that any photographs of Club activities I take are for purely personal use. They must not be published or shared in any publically-available form, including social media, without permission from the Club.

**TRAVEL:** In my absence I give permission/do not give permission (*delete as appropriate*) for my son/daughter to travel with either the Coach or designated adult if necessary 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.

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 of Member: ..... Date: .....