



# RADLETT CRICKET CLUB LIMITED

Cobden Hill, Radlett, Hertfordshire WD7 7JN Telephone 01923 856348 www.radlettcc.com

## YOUNG PLAYER MEMBERSHIP 2018

(for players under the age of 18 at 1<sup>st</sup> September 2017)

### Application for Membership / Renewal (please delete as appropriate)

This form must be completed by the parent or legal guardian of any player under the age of 18. Once completed, it should be handed to **DOREEN BROWNE**, or posted to her at **1 DARNHILLS, RADLETT, WD7 8LQ**.

| Section 1 Personal details for young player and their parent/legal guardian   |             |  |   |
|---|-------------|--|---|
| Name of child (under 18)  |             | Name of parent/legal guardian  |   |
| Child's date of birth   |             | Email address for parent/guardian  |   |
| Home Address  |             | Home Telephone   |   |
| Post Code   |             | Mobile Number  |   |
| Section 2 Emergency contact details   |             |  |   |
| In the event of an incident or emergency, where a parent or legal guardian named above cannot be contacted, please provide details of an alternative adult who can be contacted by the club. Please make this person aware that his/her details have been provided as a contact for the club: |             |  |   |
| Name of the alternative adult   |             | Phone number for this person   | Relationship to the child (eg neighbour, family friend) |
| Section 3 Subscriptions [for up to 17 weeks coaching from 8th April to 29th July]   |             |  |   |
| FAMILY  |             | £175 playing membership for one YP, plus Social Membership for two parents/guardians | £   |
| YOUNG PLAYER  | BOY         | £125   | £   |
|   | GIRL        | £90  |   |
| ADDITIONAL YOUNG PLAYER   |             | £85 [please complete separate application form for each additional YP]               | £   |
| YOUTH (16 – U18)  |             | £50  | £   |
| MINIS (U7)  |             | £85 [one hour sessions]  | £   |
| Section 4 Donations and 200 Club  |             |  |   |
| Please would you also consider making a <b>DONATION</b> ? This is especially valuable because, as a <b>CASC (Community Aided Sports Club)</b> , we can claim additional Gift Aid benefit if you are a tax-payer. Please choose one of the following options:                                  |             |  |   |
| ONE-OFF DONATION  |             |  | £   |
| MONTHLY / QUARTERLY DONATION (delete as appropriate) BY STANDING ORDER  |             |  | £   |
| <b>200 Club: Pay £30 for a "share". Each share is entered in three draws a year (at the March Winter Lunch, on President's Day and at the Christmas Lunch), with five prizes each draw: 1st Prize £250, 2nd £100, 3rd, 4th and 5<sup>th</sup>, £50 each. Pay now, or by standing order.</b>   |             |  |   |
| ONE YEAR ENTRY (each "share" is entered into the next three draws)  | Nr. Shares: |  | @ £30 £   |
| ONGOING ENTRY (please set up a standing order)  | Nr. Shares: |  | @ £30.00/yr per share                                   |

*The Club reserves the right to refuse membership should it see fit to do so. In such a case, we will return your application and payment.*

IF PAYING BY **CHEQUE**, PLEASE MAKE CHEQUES PAYABLE TO RADLETT CRICKET CLUB LTD.

IF PAYING BY **BANK TRANSFER**, PLEASE PAY ANY **ONE-OFF PAYMENTS** TO RADLETT CRICKET CLUB, HSBC, Sort Code 40-40-01 Account 32535661 AND ANY **STANDING ORDERS** FOR DONATIONS AND 200 CLUB TO Barclays, Sort Code 20-74-09 Account 70738859. PLEASE QUOTE YOUR NAME AS THE REFERENCE.

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### Section 5 Disability

The Equality Act 2010 defines a disabled person as anyone with “a physical or mental impairment, which has a substantial and long-term adverse effect on his or her ability to carry out normal day to day activities”.

Do you consider this child to have an impairment?

Yes  No

If Yes, what is the nature of their disability?

Visual Impairment

Hearing Impairment

Physical Disability

Learning Disability

Multiple Disability

### Section 6 Sporting Information

Has this child played cricket before?

Yes  No

If Yes, where has this been played?

Primary School

Secondary School

Special Educational Needs School

Club

County

Local Authority Coaching Sessions

Other, please specify below

### Section 7 Medical Information

Please detail below any important medical information that our coaches/YP manager need to know. Such as: allergies; medical conditions e.g. epilepsy, asthma, and so on; current medication; special dietary requirements; any additional needs and/or injuries. Please let us know if you would like to discuss this privately with us.

Name of Doctor/Surgery Name

Doctor/Surgery Telephone Number

