

Farnham Royal Cricket Club Junior Player Membership Form 2021

Welcome to Farnham Royal Cricket Club. This Junior Membership Form should be completed by the parent or legal guardian of any player under the age of 18 and must also be signed by the player. Please complete this form and return it to the Farnham Royal Future Legends Coaching team.

Please note the Junior Member becomes a full (non-voting) member of the club in their own right. The Parent/Guardian named below becomes a full (voting) social member if not already a member of the club, and their partner may become a social member (non-voting as well).

We will also use this information to ensure that you are kept informed about events and information concerning Farnham Royal Cricket Club.

Section 1 – Personal details of the child applying for Junior Player Membership

Family Name		
First Name(s)		
Date of Birth		
Address		
School/College Name		
Mobile Phone No.		
Home Phone No.		
Email Address		
Section 2 - Contact det	ails of Parent / Legal Guardian	
Family Name		
First Name(s)		
Club Member Status		
Relationship to Child		
Address		



Daytime Tel No.						
Evening Tel. No.						
Email Address						
Partner Name (for Social Membership)						
Section 3 – Emergency C	ontact Details	(Alterna	tive Contact)		
Name						
Relationship to child						
Address						
Daytime Tel. No.						
Evening Tel. No.						
Section 4 – Sporting Info	rmation					
Has the child played crid	cket before?	Yes		No		
If yes, where have they	played?					
Primary School						
Secondary School						
Special Education Need	s School					
Local Authority Coachin	g Sessions					
Club						
County						
Other (please specify)						

Tel: 01753 642971 Web: www.frcc.info



Section 5 – Information about any Impairment

Please provide information about any impairment your child may have so that we can determine what reasonable adjustments may be required to support your child's full participation in club activities.
Do you consider your child / the child in your care to Yes No have an impairment?
If yes, what is the nature of their impairment (please tick all that apply)?
Visual Impairment
Hearing Impairment
Physical Impairment
Learning Difficulty
Other (please specify)
If you have ticked yes in any box above, please provide us with any additional information that will assist us to ensure your child is fully supported whilst at the club.
Section 6 – Medical Information
Name of Doctor
Name and Address of Surgery
Surgery Telephone No.
Please detail below any important medical information that our coaches/junior coordinator should be aware of (e.g. epilepsy, asthma, diabetes, current medication, injuries etc.)



Medica	al Consent
	I give my consent that in an emergency situation the club may act in my place, (in loco parentis), if the need arises for the administration of emergency first aid and / or other medical treatment which in the opinion of a qualified medical practitioner may be necessary. I also understand that in such an occurrence all reasonable steps will be taken to contact me as the relevant parent / legal guardian, or the alternative adult I have named in section 3 of this form. I consent to being informed of events and offers from selected 3rd parties associated with Farnham Royal Cricket Club. (please tick box if consent given)
	I confirm that to the best of my knowledge, my child / the child in my care does not suffer from any medical condition other than those detailed above.
Section	n 7 – Data Privacy Policy
will be family'	ing below you provide consent that the details provided on this Membership Form recorded on the FRCC database and used to administer care for and supervise your s cricketing activity at the Club, and in any activities in which your family participate h the Club.
inform the Co	event of a medical issue or child protection issue arising, the Club may disclose certain ation to doctors or other medical specialists and/or to police, children's social care, urts and/or probation officers and, potentially to legal and other advisers involved in estigation.
	person completing this form, you must ensure that each person whose information clude in this form knows what will happen to their information and how it may be ed.
	details of the FRCC policy for keeping data please read the FRCC Privacy Policy ent held on the FRCC website, or request a copy now.
	By returning this completed Junior Membership Form, I agree to my child / the child in my care taking part in the activities of Farnham Royal Cricket Club (please tick box)
	I confirm that I have legal responsibility for the child named in section 1 above, and that I am entitled to give this consent (please tick box)
	I consent to being kept informed of activities at Farnham Royal Cricket Club. (please tick box if consent given)
	I consent to being informed of events and offers from selected 3rd parties associated with Farnham Royal Cricket Club. (please tick box if consent given)



	I understand that in the event of injury or illness all reasonable steps will be taken to contact me / the alternative contact, and to deal with that injury/illness appropriately (please tick box)						
	I confirm that I have received a copy of the club's Changing and Showering Policy, and consent to the child sharing changing rooms with adults in the club when playing in Senior Matches with adults (please tick box if received)						
	I confirm that I have received a copy of the club's Photography and Video Camera Policy, Code of Conduct for Members and Guests, and Code of Conduct / Set of Rules for Young People and agree to abide by them (please tick box if received)						
	I confirm that to the best of my knowledge all information provided in this form is accurate and I will inform the club of any changes to this information in a timely manner (please tick box)						
Name Guard	of Parent / ian						
Signed	d						
Date							
To be c	ompleted by the child applyin	g for Junior	Playing Membe	ership			
Name							
Signed	<u> </u>						
Date							
Please	note 2021 Junior Membership	Fees are:					
Descri	iption	Cost	Voting Rights	Additions			
(include one m	g membership for one junior des social membership for nain parent/guardian and partner)	£120.00	Main Parent / Guardian	£80.00 each additional junior member			

If you are an existing Social Member you may deduct your social membership fee from the initial cost.

Main Parent

/ Guardian

£80.00

£80.00 each additional

junior member

Playing membership for one junior

(where parent/guardian is an

existing playing member)

Tel: 01753 642971 Web: www.frcc.info



You may pre-load your membership card with money which can be used behind the bar. Please add this to your membership payment when made.

Please preload my Membership Card with £_____

Bank Details for Payment by Bank Transfer

Account Number – 70344117 Sort Code – 40-42-09 Reference – JPM <Full Name>

Version FRCC 10.0 11/01/2021

Tel: 01753 642971 Web: www.frcc.info