

KETTERING SPORTS CLUB

founded 1885

Headquarters: Northampton Road, Kettering NN15 7JT

Kettering Hockey Club is one of five sports that make up Kettering Sports Club and your annual subscription covers both the running and maintenance of the Clubhouse as well as automatic membership to all other sections:

ARCHERY - CRICKET - HOCKEY - RIFLE - TENNIS - JUNIOR FOOTBALL

Your Club membership also entitles you to hire the Clubhouse and Bar at a reduced rate

Membership Application Form (Hockey Section)

PLEASE WRITE IN BLOCK CAPITALS WHERE EVER POSSIBLE

SECTION 1: PLAYER DETAILS

Full Name

Home Address:

Postcode:

Daytime Phone Number

Evening Phone Number

D.O.B.

Gender

Male/Female

Players Mobile Phone Number

Parents Mobile Phone Number (if player U 18)

Email address:

Parents Email address: (if player is U18)

Occupation

Occupation of parent if child is under 18

Are you a qualified first aider?

School (if player is U18)

SECTION 2: MEDICAL INFORMATION AND CONSENT

(To be completed by ALL applicants and by PARENT/GUARDIAN if applicant is under 18)

In case of emergency and as part of the Club's responsibility to its membership, ALL applicants are required to complete this medical information form as accurately as possible

Next of Kin:

Relationship:

Mobile Phone No.

Alternative Phone No.

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

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

Do you have any long term illnesses or injuries?

Declaration: I consider myself/my son/my daughter* to be physically fit and capable of full participation and I agree to notify the Club of any changes to the medical information provided. Furthermore, in the event that I/he/she* is injured I give my permission for emergency medical treatment on my/his/her behalf to be obtained.

SIGNATURE (and name in Block Capitals)

Date

Relationship if signing for child U18

KETTERING HOCKEY CLUB

SECTION 3: Under 18 Member Consent (to be completed by parent/guardian)

It is a requirement of the Club's policy that parental consent is provided for participation, transportation and photography. The Code of Conduct and Safeguarding and Protection Young People in Hockey policies are available if required. 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 by transport provided by the club, which may include travelling in other players' private cars

PHOTOGRAPHY : In some environments, particularly adult competition it is impossible to control photography by external parties, 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 the club. Such images shall only be used for publicity/training purposes in accordance with the club's Safeguarding and Protection Young People in Hockey Policy and Photography Policy and I give consent for my son/daughter to feature in such photo's/images. I hereby only grant approved agents the right to use the images resulting from photo/film shoots. This includes any reproductions or adaptations of the images for all general purposes e.g. local newspapers, local magazines, other promotional articles (inc.flyers) and club website

SIGNATURE (and Name in Block Capitals)	Date:	Relationship:
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SECTION 4: Ethnicity and Disability

Whilst it is not compulsory to fill in the next two sections, it would be of benefit to us.

Kettering Hockey Club and Sport England are committed to promoting and developing sport equity which is about fairness in sport, equality of access, recognising inequalities and taking steps to address them. Through the monitoring of players profiles, we can identify any issues relating to under-representation of different groups and can develop strategies to ensure that all people have the opportunity to develop and progress.

Please tick the box that best describes your ethnicity

White British	<input type="checkbox"/>	Asian or Asian British-Pakistan	<input type="checkbox"/>
White Irish	<input type="checkbox"/>	Asian / Asian British-Bangladeshi	<input type="checkbox"/>
White Other	<input type="checkbox"/>	Asian or Asian British-Other	<input type="checkbox"/>
Mixed - White and Black Caribbean	<input type="checkbox"/>	Black or Black British-Caribbean	<input type="checkbox"/>
Mixed - White and Black African	<input type="checkbox"/>	Black or Black British-African	<input type="checkbox"/>
Mixed - White and Asian	<input type="checkbox"/>	Black or Black British-Other	<input type="checkbox"/>
Mixed - Other	<input type="checkbox"/>	Chinese	<input type="checkbox"/>
Asian or Asian British-Indian	<input type="checkbox"/>	Other Ethnic Group	<input type="checkbox"/>

Please tick to indicate any learning or physical disabilities

Visually Impaired	<input type="checkbox"/>	Learning Disability	<input type="checkbox"/>
Hearing Impaired	<input type="checkbox"/>	Multiple Disability	<input type="checkbox"/>
Physical Disability	<input type="checkbox"/>		<input type="checkbox"/>

Please add any additional relevant Information:

Please note that the above information will be held on the club's records and as such is subject to the Data Protection Act. Note that it is legal requirement (Licensing Laws) that names and addresses of all Club members be held on the club premises. The above information will only be used for club purposes. Please contact Tom Sellers (01526 392476) for further information.

I agree to abide by the club rules at all times

Signature

Date

(Parents/Guardians signature if Applicant is under 18 years old)

PLEASE RETURN COMPLETED FORMS TO YOUR CAPTAIN