



Membership Form 2018-2019

ATHERSTONE ADDERS HOCKEY CLUB

All members of Atherstone Adders Hockey Club are required to complete this registration form as accurately as possible and return it, with appropriate payment, to a Club Officer as soon as possible and by the **end of October 2018** at the latest. All details will be kept in a secure database in accordance with the new GDPR regulations with access restricted to authorised Club Officers only.

MEMBER CONTACT INFORMATION

MEMBER NO:		TITLE	
FULL NAME			
ADDRESS 1		DATE OF BIRTH	
ADDRESS 2		HOME PHONE*	
TOWN		MOBILE PHONE*	
POST CODE		EMERGENCY NO**	
SCHOOL		EMERGENCY NO**	
YEAR GROUP		EMAIL*	

* If Under 18 please enter parent/guardian contact details.

** Please use an alternative emergency number if possible.

HOCKEY MEMBERSHIP TYPE (2018-19 SEASON)

MEMBER TYPE	DESCRIPTION	FEE	TICK
SENIOR – 1*	Full Senior Membership	£85.00	
SENIOR – 2*	Concession Senior Membership	£55.00	
STUDENT*	Students in full time or further education/Apprenticeship (14+) who play regularly for a Senior team on Saturday	£55.00	
BADGERS*	14 – 16 in Full Time Education who play regularly on Saturday	£55.00	
JUNIOR*	Annual Membership Fee	£50.00	
Non Playing	Annual Fees for non-playing members of the club	£5.00	

* Match fees are extra and are paid on Match Day – further details on the Adders website

ATHERSTONE SPORTS CLUB MEMBERSHIP (September 2018 – August 2019)

TYPE	DESCRIPTION	FEE	TICK
ASC – 1	Individual Adult Membership Fee (over 18's only)	£5.00	
ASC - 2	Family Membership Fee. (Please list all family members including parents and children.)	£10.00	
ASC -3	Membership already in place (e.g. through a family membership or another club) Please describe	£0.00	



Membership Form 2018-2019

ATHERSTONE ADDERS HOCKEY CLUB

ETHNICITY

DESCRIPTION	PLEASE TICK	DESCRIPTION	PLEASE TICK
White British		Asian/Asian British - Pakistani	
White Irish		Asian/Asian British - Bangladeshi	
White Other		Asian/Asian British - Other	
Mixed - White & Black Caribbean		Black/Black British - Caribbean	
Mixed - White & Black African		Black/Black British - African	
Mixed - White & Asian		Black/Black British - Other	
Mixed - Other		Chinese	
Asian/Asian British - Indian		Other Ethnic Group	

DISABILITY

DESCRIPTION	COMMENTS	PLEASE TICK
Deaf		
Visually impaired		
Hearing impaired		
Physical disability		
Learning disability		
Multiple disability		

MEDICAL INFORMATION & CONSENT

NEXT OF KIN		DOCTORS NAME	
RELATIONSHIP		SURGERY	
As far as you are aware, are you allergic to any drugs? (Please state)			
Are you taking any regular medication? If so, for what reason?			
Do you have any special requirements?			
Declaration: I consider myself (my son/daughter)* to be physically fit and capable of full participation and agree to notify the club of any changes to the medical information provided. Furthermore, in the event that I am injured I give my permission for myself (my son/daughter)* for the team managers/coaches appointed by AAHC to obtain emergency medical treatment on my (his/her) behalf.			
NAME		RELATIONSHIP	
SIGNATURE		DATE	

*to be completed by PARENT or GUARDIAN if U18



Membership Form 2018-2019

ATHERSTONE ADDERS HOCKEY CLUB

UNDER 18 MEMBER CONSENT (to be completed by PARENT or GUARDIAN)

TRANSPORTATION: I consent to my son/daughter* travelling to venues for matches and training by transport provided by the Club which may include travelling in other players private cars. In such circumstances the drivers cannot be held responsible for any resulting injury, loss or damage to individuals.

PHOTOGRAPHY: In some environments, particularly match situations, it is impossible to control photography by external parties. However, I am aware that there maybe times that photographs and/or footage maybe taken during matches and training sessions by approved agents and/or officers of Atherstone Adders Hockey Club. Such images shall only be used for publicity/training purposes in accordance with the Atherstone Adders Hockey Club Child Protection Policy and I give consent for my son/ daughter to feature in such photos/ images. I hereby grant Atherstone Adders Hockey Club the right to use the resulting images/footage, including any reproductions or adaptations, for all general purposes related to Atherstone Adders Hockey Club and the Club's website.

CHILD WELFARE: I have read and understand the Child Welfare Policy on the Atherstone Adders website (www.addershockey.com)

NAME		RELATIONSHIP	
SIGNATURE		DATE	

MEMBER CONSENT

TERMS & CONDITIONS: We want you to know all about what is going on in our Club and we can only realistically do that by collecting and storing your contact information.

From time to time we would like to send you information and the latest info and offers from Addershockey. We'll always treat your personal details with the greatest care and will never sell them to other companies for marketing purposes.

Please sign below to say that you would like to continue to receive newsletters and other information from Atherstone Adders Hockey Club and that you have agreed to the terms and conditions of our Privacy Policy as laid out on our website at www.addershockey.com

NAME			
SIGNATURE		DATE	



Membership Form 2018-2019
ATHERSTONE ADDERS HOCKEY CLUB

NOTES:

FOR ADMIN USE:

RECEIVED BY:		ADDED TO D/B BY:	
DATE:		DATE:	