



JUNIOR MEMBERSHIP APPLICATION FORM

For individuals under 18 years of age. Please complete all sections.

SECTION ONE: PERSONAL INFORMATION

Personal Details

Surname: _____
First Name: _____
Date of Birth: ____ / ____ / _____ School Year (as of 01/09/11): _____

Address

Address: _____

Postcode: _____

Contact Details

Home Tel: _____
Email: _____

	Parent/Guardian		Parent/Guardian
Name:	_____	Name:	_____
Mobile:	_____	Mobile:	_____
Relationship:	_____	Relationship:	_____

SECTION TWO: PRIVACY

Your email addresses will be used to send you important Member information such as notification of Annual General Meetings. If you would prefer to receive such notifications by post, please tick the box below:

I do not wish to receive important Member notifications by email

In addition, we also from time to time email the Membership about forthcoming events and other news.

I do not wish to receive other emails from Datchworth Sports Club

I also wish to receive email bulletins relevant to:

Cricket Rugby Tennis

SECTION THREE: EMERGENCIES AND MEDICAL DETAILS

Please add the details of **at least one person** (other than parents/guardians named in SECTION ONE) to act as an emergency contact in case parents are unreachable.

Surname:	Surname:
First Name:	First Name:
Mobile tel:	Mobile tel:
Home tel:	Home tel:
Work tel:	Work tel:

Please use the space below to detail any health issues your child has e.g. asthma & medication.

SECTION FOUR: PARENTAL CONSENT

First Aid / Emergency

Basic first aid may be given to your child should they sustain an injury whilst under the supervision of Datchworth Sports Club.

Please tick here if you consent to treatment being given.

Should further treatment be deemed necessary, the club will endeavour to contact a parent / guardian and arrange for further medical assistance.

Please tick here if you consent to any further treatment.

Photography

Tick here if you consent to video footage being taken in the interests of technical analysis to aid coaching.

Tick here if you consent to video footage being taken for family records / promotional material.

Tick here if you consent to photographs being taken which may be used in Club promotional literature or for press reports.

Away Matches

Tick here if you consent to your child participating in competitive matches at other clubs.

Tick here if you consent to your child travelling to away matches in transport provided by either Officers of the Club, coaches appointed by the Club, parents of other Datchworth players or senior Members of the Club if playing in senior team matches.

Code Of Conduct *

I have read, and agree to abide by, the Parent's Code Of Conduct for my child's sport/s

I will ensure my child abides by the Player's Code Of Conduct for their sport/s

* Code Of Conduct: These boxes must be ticked if your child wants to take part.

SECTION FIVE: SUBSCRIPTION PAYMENT

Please select all that apply, and add any supplements/donations to your mandatory £25.00 subscription.

I wish to join Datchworth Sports Club for 2011/12. My next renewal will be due on 01/10/12.
AMOUNT DUE: £25

I also wish to play rugby for the 2011/12 season and would like to make a donation to the Rugby Section. The suggested donation is £45 for Youth and Mini players. By making a donation we are able to treat the amount as Gift Aid and reclaim 25p of tax for every £1 you give. Please enter the amount you wish to donate in the space provided and answer the questions below for Gift Aid purposes.

SUGGESTED DONATION: £45

I WISH TO DONATE £_____ TO THE RUGBY SECTION

PLEASE TREAT THE ABOVE GIFT AS A GIFT AID DONATION

PLEASE TREAT ALL GIFTS OF MONEY THAT I MAKE TODAY AND IN THE FUTURE AS GIFT AID DONATIONS

1. ARE YOU COMPLETING THIS FORM FOR A JUNIOR, ARE A UK TAXPAYER AND LIVE AT THE SAME ADDRESS LISTED IN SECTION ONE? YES / NO

If "YES", please skip question 2. You do not need to fill in SECTION SIX, but please give your details below, and provide a signature at the bottom of this page:

TITLE: _____ INITIALS: _____ SURNAME: _____

2. ARE YOU COMPLETING THIS FORM FOR A JUNIOR, ARE A UK TAXPAYER BUT LIVE AT A DIFFERENT ADDRESS? YES / NO

If "YES", please complete SECTION SIX: GIFT AID DECLARATION in order for us to be able to treat your donation as Gift Aid. Thank you.

I also wish to play cricket for the 2012 season.
ADDITIONAL FEE: £25 U18

I also wish to play tennis for the 2012 season.
ADDITIONAL FEE: £15 Junior 12-18
£5 Junior 7-11
FREE Junior U7

Please make cheques payable to "Datchworth Sports Club"

Amount enclosed: £_____

Signed: _____ Date: _____

Please hand your form and payment in behind the bar for the attention of Will Nash, or send to:
Will Nash, 71 Nutcroft, Datchworth, Knebworth, Herts. SG3 6TQ.

SECTION SIX: GIFT AID DECLARATION

Only to be completed if you have answered "YES" to Question 2 in SECTION FIVE

Gift Aid declaration

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Name of CASC: **Datchworth Sports Club**

Please treat

The enclosed gift of £ _____ as a Gift Aid donation; **OR**

All gifts of money that I make today and in the future as Gift Aid donations



Please tick the appropriate box

You must pay an amount of Income Tax and/or Capital Gains Tax for each tax year (6 April one year to 5 April the next) that is at least equal to the amount of tax that the CASC (Datchworth Sports Club) will reclaim on your gifts for that tax year.

Donor's details

Title _____ Initial(s) _____ Surname _____

Home address _____

Postcode _____

Date _____

Signature _____

Please notify Datchworth Sports Club if you:

1. Want to cancel this declaration.
2. Change your name or home address.
3. No longer pay sufficient tax on your income and/or capital gains.

Tax claimed by the CASC

Datchworth Sports Club will reclaim 25p of tax on every £1 you give on or after 6 April 2008.

If you pay income tax at the higher rate, you must include all your Gift Aid donations on your Self Assessment tax return if you want to receive the additional tax relief due to you.