



Senior Cricket Membership 2014 Application Form

<p>Name:</p>	
<p>Address:</p>	
<p>Mobile Phone Number:</p>	
<p>Home Telephone Number:</p>	
<p>eMail Address:</p>	
<p>Playing Details: <i>i.e left hand bat, bowler, wicket keeper...</i></p>	
<p>Emergency Contact:</p>	
<p>Relationship to you: <i>i.e Wife, Girlfriend Aunt etc...</i></p>	
<p>Emergency Contact Home Telephone Number: Mobile Phone Number:</p>	





Medical Consent Form

Consent to medical treatment

The following information & consent is required to ensure the health & wellbeing of all members participating In Bagenalstown Cricket Club's activities.

The information contained in this form is confidential and will only be used to safeguard and promote the member's health & wellbeing should the need arise.

Name:	
Date of Birth:	
Name of GP:	
Address of GP:	
GP Phone Number:	

Please provide details of any pre-existing medical conditions that may affect the member's Participation in the event/activity programme:

Details of medication or treatment required:	
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Details of any existing injuries: <i>include when injury occurred and treatment</i>	
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Details of any allergies:	
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include allergies to medicines

I undertake to inform Bagenalstown Cricket Club should any of the information contained in this form changes.

Signature: _____

Name: _____

Date: _____



Consent form for the use of photographs or recordings

In accordance with its policies and procedures where possible we will not permit photographs, film, video or other images of children or other vulnerable adults to be taken or used without your consent.

Bagenalstown Cricket Club will take all reasonable measures to ensure these images are being solely for the puposes for which they are intended. If you become aware of these images being used inappropriately, please contact Bagenalstown Cricket Club's committe member immediately.

Bagenalstown Cricket Club reserve the right at all times to prohibit the use of photography, film or video at any event with which it is associated.

I, _____ consent to photographing, videoing or filming my involvement at Bagenalstown Cricket Club activites.

Signature: _____

Name: _____

Date: _____