

JUNIOR Hockey

REGISTRATION FORM 2010

Information given is kept confidential and only given to those who need to know it.

Last Name:		First Name:	
Address:			
Address:			
Address:		Postcode:	
Home Tel:		Mobile:	
Email: (One only - that can be used for important communications during the season. Please write clearly)			
School:		Date of Birth:	
		Age (You must be 7 to join):	
Age Group(as of Jan 1 st 2010) (please circle as applicable)		Female U9 U10 U11 U12 U13 U14 U15 U16 U17 U18	
		Male U9 U10 U11 U12 U13 U14 U15 U16 U17 U18	
Parents names:			
SOS CONTACT NUMBER:		NAME:	
(IN CASE OF EMERGENCY, WE WILL CONTACT THIS PHONE NUMBER)			
MEDICAL INFORMATION - ALL INFORMATION GIVEN IS TREATED CONFIDENTIALLY			
DO YOU SUFFER FROM (Please circle, which applies)			
ASTHMA:		DIABETES:	
YES NO		YES NO	
EPILEPSY:		ALLERGIES:	
YES NO		YES NO	
If YES to any of the above please give clear details. Please also give details of any other significant illness/medical condition/injuries or long term problem that is important for us to be aware of:			
.....			
.....			
.....			
Consent for use of photographs: There may be occasion during the season where photographs/videos will be taken for use within the Club newsletter or for display on the website. By signing this form below you are consenting for your child to be featured.			
Transport Policy: Wimbledon Hockey Club policy is that parents or other responsible adults will be transporting players to and from matches and practice sessions and therefore the Club will not be registering Private Vehicles for the transportation of individuals in connection with any fixtures or practice sessions arranged by the Club. The implementation of this policy is not intended to exclude any player from participation.			
Notes for Parents and Children: A copy of the Full Junior Policy document is attached for your information. Please find time to read this document together.			
Membership Fee/s are as detailed below:			
	Please tick as appropriate:	Cost	Collected (Club Use Only)
Full Junior Wimbledon Club Member	<input type="checkbox"/>	£0	<input type="checkbox"/>
Hockey Only Member	<input type="checkbox"/>	£110	<input type="checkbox"/>
<u>Cheques should be made payable to 'The Wimbledon Club'</u>			
(Please write the name of the hockey player and age group on the back)			

Name of child:..... Parent Name:.....

Date Signed.....Signature for consent:.....