

# North Somerset Athletics Club – Membership Form Jan-Dec 2010

## Athlete's Details

Athlete's Full Name:

Date of Birth:

Age on 1<sup>st</sup> July 2010:

Male/Female

Full Postal Address:

Email Address: (please use block letters)

School From September 2009

School Year from September 2009

If aged 11 and over, do you plan to compete on behalf of the club?: Yes/No

## Parent/Guardian/Carer's Emergency Contact Details

Name: (Parent/Guardian/Carer)

Home Phone:

Mobile:

**Medical Details:** Please complete as fully as possible (allergies, medications, significant previous injuries etc.). Use rear of form if necessary

Do you consider your child to have a disability? (Yes/No)

If yes, please indicate details below or on rear of form.

## Permissions & Consents From Parents/Guardians/Carers: Please read & acknowledge as indicated

**Image & Photograph Policy:** North Somerset Athletics Club will not permit photographs, video images or images of young athletes to be taken or used without the consent of Parents/Carers/Guardians. North Somerset Athletics Club will take steps to ensure these images are used solely for the purposes they are intended, which is the promotion and celebration of the activities of the Club. If you become aware that these images are being used inappropriately, or you wish to have images of your child removed from promotional material, please contact the Club's Welfare Office.

I have read and understood the Image & Photograph Policy,

and consent to images of my child being used as stated above. **Signed:**.....

**Accident & Injury Policy:** Whilst we treat safety as our main priority, occasional accidents and injuries are inevitable. You can assist the Club by ensuring that the Medical Details section of this form is completed fully and accurately. In signing below, you consent to your child receiving medical treatment which, in the opinion of a qualified medical practitioner, may be necessary to deal with the consequences of any accidents or injuries.

I have read and understood the Accident & Injury Policy,

and consent to basic First Aid being administered where deemed necessary. **Signed:**.....

## Ethnicity – information is collected for England Athletics

**White** English  Scottish  Welsh  Irish  Other (please specify)  .....

**Mixed** White & Black Caribbean  White & Black African  White & Asian  Other (please specify)  .....

**Asian** Indian  Pakistani  Bangladeshi  Other (please specify)  .....

**Black** Caribbean  African  Other (please specify)  .....

**Chinese** Chinese

## Membership Agreement

I have read and understood the above permissions and Code of Conduct for Athletes, and agree that my child will abide by all reasonable requests from North Somerset Athletics Club coaches to ensure safety, equity and enjoyment are maintained for all Athletes.

Signed.....

Print Name: .....

The membership fee is included in the training session fee charged each term. North Somerset Athletics Club must have a completed membership for athletes who take part in training sessions. Data provided on this form will be stored on a database managed on behalf of England Athletics by Athletics Services. Personal contact information will be used to send a competition licence/membership card and seek appropriate data clearances.