

HARROGATE HOCKEY CLUB

Granby Hockey Centre
Ainsty Road, Harrogate, HG1 4AP
Telephone: 01423 565696
e-mail: info@harrogatehockey.co.uk



Notes on completing the Junior Section Annual Subscription Form

Please note the following when completing the Junior Section Annual Subscription form:

1. All sections should be completed wherever possible. If no answer applies enter 'n/a'
2. The 'Ethnicity and Disability Information Form' is optional and is for the Club to use for development purposes only
3. Junior members must be under the age of 16 as at 1st September of any season
4. Payment options:
 - Single payment (for season w/c 5/9/2011) - 1x £74 (£67 for 2nd+ child). Payment needs to be made within 3 weeks of the date of application or the start of the season. **Note** points 5,6,7.
The subscription fee will be adjusted depending on joining date after the start of season, please check with the Junior Co-ordinator if unsure.
 - Two payments (for season w/c 5/9/2011) - 2x £37 (£34 for 2nd+ child). First payment needs to be made within 3 weeks of the date of application or the start of the season. Second payment due by 15/12/2011. **Note** points 5,6,7.
The subscription fee will be adjusted depending on joining date after the start of season, please check with the Junior Co-ordinator if unsure.
5. Your membership & payment is not confirmed until you have received your membership card. (You will also receive a welcome letter and copy of the 'Code of Conduct - Junior Section Players')
6. Where payments have not been received within the time scales indicated a player's place will be offered to another on the waiting list
7. Non members will not be allowed to play matches for the Club or attend training
8. Completed Junior Subscription Forms (and payments) are to be sent to:

Junior Section Treasurer
Harrogate Hockey Club
24 St Leonards Oval
Harrogate
HG2 8NT

9. Please complete one subscription form per player
10. If you are paying by cheque, please put the players' name/s on the back of the cheque and make it payable to 'Harrogate Hockey Club'
11. Please include a self addressed envelope (A5 or DL ideally) to return the membership card, welcome letter and 'Code of Conduct - Junior Section Players' to you following receipt of payment
12. Refund of subscription fees will be given depending on individual circumstances and will be decided by the Junior Co-ordinator

NOTE: Juniors who have already paid a Junior Section annual subscription will need to pay an additional £20 to the Men's or Ladies Sections as soon as they expect to play 10 senior games or over. They will also need to ensure they apply for a League number before playing any senior matches. (The senior team captain should do this). The minimum age for playing senior matches is currently 13, but can be subject to change.

*If you have any queries regarding Junior Section subscriptions, please contact
James Berman, Junior Co-ordinator on 07946 098787*

Parental Consent Statement

DECLARATION: My child is in good health and I consider him / her* capable of taking part in activities at Harrogate Hockey Club. I have completed the medical details and consent that in the event of any illness / accident, any necessary treatment can be administered to my child, which may include the use of anaesthetics. I understand that in all cases the club / coaches will always make every reasonable effort to contact parents in an emergency, but in the best interests of the child, a club representative is hereby authorised to act *In Loco Parentis* in my absence. I also understand that while club personnel will take every reasonable precaution to ensure that accidents do not happen, neither they nor the club can necessarily be held responsible for any loss, damage or injury suffered by my child.

TRANSPORTATION: I consent to my son/daughter* travelling to venues for matches and training, in transport provided by the club, which may include travelling in other players' private cars.

PHOTOGRAPHY: In some environments, particularly at tournaments / matches, it is impossible to control photography by external parties. However, I am aware that there may be times that photographs and/or footage may be taken during tournaments/matches and training sessions by approved agents and/or officers of Harrogate Hockey Club. Such images shall only be used for publicity/training purposes in accordance with the Harrogate Hockey Club Safeguarding and Protecting Young People Policy and Photography Policy and I give consent for my son/ daughter* to feature in such photos/images. I hereby only grant approved agents the right to use the images resulting from the photo/film shoots. This includes any reproductions or adaptations of the images for all general purposes, e.g. local newspapers, local magazines, newsletters, other promotional articles (including flyers) and the club's website. (*delete as appropriate)

Please note also that if you do wish to do any video filming or take any photos on Club premises to please inform a member of the Management Committee beforehand. Contact details can be found in the Members Handbook or on our website.

Parent / Guardian's printed name and relationship to player / participant

NAME:

RELATIONSHIP:

Signature of Parent / Guardian:

Date:

For parents (please complete)

	YES / NO	NAME:
Would you be interested in (or learning how to) coach and/or umpire?		
Would you be willing to be i) a team manager ii) parent helper or iii) officer of the Club?		
Would your company or workplace be interested in sponsorship at Harrogate Hockey Club at all?		

What skills do you have that could help develop Harrogate Hockey Club? (e.g. web design, accounting, printing)

Harrogate Hockey Club



Ethnicity and Disability Information Form

Information in this form is optional and will be used for development purposes only

Ethnicity of club members

Please tick the box that best describes your ethnicity

	TICK		TICK
White British	<input type="checkbox"/>	Asian or Asian British – Pakistani	<input type="checkbox"/>
White Irish	<input type="checkbox"/>	Asian or Asian British – Bangladeshi	<input type="checkbox"/>
White Other	<input type="checkbox"/>	Asian or Asian British – Other	<input type="checkbox"/>
Mixed – White and Black Caribbean	<input type="checkbox"/>	Black or Black British – Caribbean	<input type="checkbox"/>
Mixed – White and Black African	<input type="checkbox"/>	Black or Black British – African	<input type="checkbox"/>
Mixed – White and Asian	<input type="checkbox"/>	Black or Black British – Other	<input type="checkbox"/>
Mixed – Other	<input type="checkbox"/>	Chinese	<input type="checkbox"/>
Asian or Asian British - Indian	<input type="checkbox"/>	Other Ethnic Group	<input type="checkbox"/>

Disability of club members

Please tick the box that best describes your disability

	TICK		TICK
Deaf	<input type="checkbox"/>	Physical disability	<input type="checkbox"/>
Visually Impaired	<input type="checkbox"/>	Learning disability	<input type="checkbox"/>
Hearing Impaired	<input type="checkbox"/>	Multiple disability	<input type="checkbox"/>

Please add any additional relevant information: