

All prospective members of Timperley Sports Club (TSC) are required to complete this registration form. For junior membership (under 18) this form must be completed & signed by a parent / guardian. All details will be kept in a secure database with access restricted to authorised TSC & hockey academy officers and coaches and used to support the administration, communication and development of TSC and Hockey Section

SECTION 1: MEMBER DETAILS (Under 18)

CHILD'S NAME			
ADDRESS		DATE OF BIRTH	
		GENDER	
POST CODE		SCHOOL YEAR	
HOME PHONE		SCHOOL	
MAIN E-MAIL			
2nd E-MAIL		U18 email (optional)	

SECTION 2: MEMBERSHIP TYPE

MEMBER TYPE	DESCRIPTION		Tick to Gift Aid (*)
JUNIOR (under 18) MEMBERSHIP	Timperley Sports Club - Junior Subscription (*) or Current TSC Junior Cricket or Lacrosse member	£55 n/a	
	Hockey Academy Coaching Fee	£	N/A

(*) I understand that the Club defines its basic Junior Subscription as a voluntary donation and that an additional charge is made in respect of the provision of coaching and playing facilities. I understand that this donation is eligible for Gift Aid and as such I have completed the attached Gift Aid declaration.

SECTION 3: ETHNICITY & DISABILITY

Whilst it is not compulsory to complete this section, England Hockey request this data from clubs as part of the annual affiliation process and completing this data accurately enables the club to give an accurate picture to England Hockey on our membership, this can support their work to develop the sport. **PLEASE TICK THE BOX THAT BEST DESCRIBES YOUR ETHNICITY**

ETHNICITY OF MEMBER	TICK BOX		TICK BOX		TICK BOX
White British		Mixed – Other		Black or Black British – African	
White Irish		Asian or Asian British - Indian		Black or Black British – Other	
White Other		Asian or Asian British - Pakistani		Chinese	
Mixed – White and Black Caribbean		Asian or Asian British - Bangladeshi		Other Ethnic Group (Please State)	
Mixed – White and Black African		Asian or Asian British – Other			
Mixed – White and Asian		Black or Black British – Caribbean			

PLEASE TICK TO INDICATE ANY LEARNING OR PHYSICAL DISABILITIES

DISABILITY	TICK BOX		TICK BOX
Deaf		Physical disability	
Visually impaired		Learning disability	
Hearing impaired		Multiple disability	

SECTION 4: MEMBER INFORMATION – JUNIORS AND PARENTS

(Information in this section is optional and will be used for club development purposes only)

To be completed by parents and guardians Parents are encouraged to get involved in the club and we actively require volunteers to help with the running of our club and at specific events. Please could you identify if you would be willing to support us in any of the following areas (please tick all that apply); Team Manager (admin) <input type="checkbox"/> Website/Communications <input type="checkbox"/> Social events <input type="checkbox"/> Administration / Register <input type="checkbox"/> Tournament Admin <input type="checkbox"/> <input type="checkbox"/> Coaching <input type="checkbox"/> Umpiring <input type="checkbox"/> Finance <input type="checkbox"/> Fixture Organisation <input type="checkbox"/> Sponsorship <input type="checkbox"/> Child Welfare Officer <input type="checkbox"/> Other <input type="checkbox"/> If you have specified 'other', please state:
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SECTION 5: MEDICAL INFORMATION

In case of emergency and as part of the clubs responsibility to its membership, ALL club members are required to complete this medical information form as accurately as possible. Details will be held securely with access restricted to authorised club officers only. Next of Kin details will be used for emergency contact. Medical information can be discussed confidentially with the Hockey Child Welfare Officer

DOCTOR'S NAME		SURGERY		DR's PHONE NO	
NEXT OF KIN (1) (emergency Contact)		RELATIONSHIP		MOBILE PHONE	
NEXT OF KIN (2) (emergency Contact)		RELATIONSHIP		MOBILE PHONE	
As far as you are aware, does your child have any allergies? (please state) YES / NO					
Is your child taking any regular medication? If so, for what reason? Please ensure medication, inhalers etc are clearly labelled and brought to all hockey sessions if they may be required. (please state) YES / NO					
Does your child have any long term illnesses or injuries? (please state) YES / NO					
Does your child have any special requirements that your coach should be aware of? (please state) YES / NO					

SECTION 6: UNDER 18 PARENTAL CONSENT

Parental consent is required for all junior members to participate in activities, training and matches organised by the Club. The Hockey section is affiliated to England Hockey(EH) , has Clubs First accreditation, and applies where applicable EH's Policies and guidance including Safeguarding and Protecting Young People in Hockey, Respect and Codes of Conduct. For details see: www.timperleyhockeyclub.com .

MEDICAL: I consider my child to be physically fit and capable of full participation and agree to notify the club of any changes to the medical information provided. Furthermore, in the event that I am injured I give my permission (for my child)* for the team managers/coaches appointed by TSC or Hockey Academy to obtain emergency medical treatment on my behalf.

TRANSPORTATION: It is parent's responsibility to arrange for transport for their child to off-site venues for training or matches. Exceptionally, if this is not possible, I consent to my child (named above) travelling to off-site venues for matches and training by transport organised by the Club which may include travelling in other parents/players or coaches private cars.

PHOTOGRAPHY: In some environments, 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 matches and training sessions by approved agents and/or officers of Timperley HC. Such images shall only be used for publicity/training purposes and I give consent for my child to feature in such photos/ images. This includes any use of the images for all general purposes ie local newspapers/magazines, other promotional articles (inc. flyers) and the club's website.

The Club operates an Open Access Policy, which means that children will be supervised whilst taking part in specific activities. However, they will not be confined to the ground or prevented from coming or going.

All sports are undertaken at the participants own risk. TSC does not carry personal injury insurance for playing members and playing members are recommended to take out their own insurance policy against accidents or injury whilst participating in any aspect of sport whilst on or off the Club's premises. TSC shall not be held responsible for any claim arising out of personal injury or accident incurred whilst participating in Club sports whether on or off Club premises.

There are a number of risks which may results in accidents associated with participation in all sports. Detailed below are some of the risks and precautions to reduce risks associated with participation in Club Sports. Further information is available on the Hockey section and England Hockey websites.

Hockey: Specific Risk of Accidental Injury	Pre-cautions: Use of the following equipment is recommended
Feet, Hands and Legs Face Body and Head (GK)	Hockey glove(s), finger or knuckle protectors. Shin/ankle protectors (pads). Suitable footwear. Mouthguards. Face masks (for penalty corners senior games or older age groups) Body armour, pads, gloves, neck and abdominal protection. Helmet

It must be stressed that the Club may provide some of the above specialist protective equipment, but it is the responsibility of parents to ensure that their child has the correct personal protective equipment and clothing.

I have read the details contained within this form and agree to the conditions under which the applicant takes part in sporting activity.

I hereby apply for membership of Timperley Sports Club. If elected I agree to pay subscriptions and abide by the Rules and Regulations and Code of Conduct of the Club (see www.timperley-sports.com).

SIGNED (parent/Guardian for under 18's)		DATE		RELATIONSHIP	
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TO BE COMPLETED BY CURRENT CLUB MEMBER(S)

Membership Proposed by:	Name		Section	
Membership Seconded by:	Name		Section	

Gift Aid declaration – for past, present & future donations

Timperley Sports Club (incorporating Cricket, Hockey and Lacrosse). Timperley Sports Club is registered as a Community Amateur Sports Club.

Please treat as Gift Aid donations all qualifying gifts of money made today in the past 4 years in the future

today ☐ the past 4 years ☐ in the future ☐

Please tick all boxes you wish to apply.

I confirm I have paid or will pay an amount of Income Tax and/or Capital Gains Tax for each tax year (6 April to 5 April) that is at least equal to the amount of tax that all the charities or Community Amateur Sports Clubs (CASCs) that I donate to will reclaim on my gifts for that tax year.

I understand that other taxes such as VAT and Council Tax do not qualify.

I understand the charity will reclaim 28p of tax on every £1 that I gave up to 5 April 2008 and will reclaim 25p of tax on every £1 that I give on or after 6 April 2008.

Donor's details

TITLE	
FIRST NAME OR INITIAL(S)	
SURNAME	
FULL HOME ADDRESS	
POSTCODE	
DATE	
SIGNATURE	
(For internal use) CHILD'S NAME and SPORT PLAYED	

Please notify the Timperley Sports Club (CASC) if you:

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

If you pay Income Tax at the higher or additional rate and want to receive the additional tax relief due to you, you must include all your Gift Aid donations on your Self Assessment tax return or ask HM Revenue and Customs to adjust your tax code.