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**Gala Cricket Club Foxes**

**Junior Cricket Membership Application Form 2024**

**Why Join?**

For You:

* Competitive games, trainings and development opportunities during the summer with qualified coaches
* Being part of a family club that aims provides positive cricket experiences for all its members.

For the Club:

* We have a five year club strategy and one of its aims is to increase our junior membership as part of our long term development
* The club will aim to develop more coaches and volunteers and provide a more positive impact in our community.

**What is the cost?**

Junior Membership for under 16s is £25 if paid by 31 May 2024, or £30 if paid after 31 May 2024.

**When does it take place?**

All Gala Cricket Club’s junior cricket training is on Tuesday evenings from 6.30pm to 8pm at Meigle Park, Galashiels, TD1 1NE.

We also have games which usually take place on Wednesdays and Fridays.

All members should bring a water bottle, wear suitable shoes and clothing for running around in, and any personal cricket equipment they would like to use (equipment is provided by the club if needed).

**How to join?**

Simply complete the forms and return with your membership fee (details on next pages).

The form is also available at [www.galacricketclub.co.uk](http://www.galacricketclub.co.uk).

**Junior Registration Form**

|  |  |
| --- | --- |
| **First Name** |  |
| **Surname**  |  |
| **Mobile Telephone Number** |  |
| **Date of Birth** |  |
| **School & Year** |  |
| **Emergency Contact Name and****Relationship to you e.g. mother** |  |
| **Emergency Contact Phone****Number** |  |
| **2nd Emergency Contact Phone****Number** |  |
| **Please tick box if happy to be added to a Whatsapp Group for parents to keep them informed of training/games during season** |  |

**Medical Consent Form**

The following information and consent is requested to ensure the health and well-being of all children participating in Gala Cricket Club’s activities. The information contained in this form is confidential and will only be used to safeguard and promote the child’s health and well-being should the need arise.

**Name of child:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date of Birth:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name of GP and GP Surgery:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please provide details of any pre-existing medical conditions that may affect the child’s participation in the activity/event programme:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Details of medication or treatment required:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Details of any existing injuries (include when injury occurred and treatment received):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Details of any allergies, including allergies to medication:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent/Guardian/Legal Carer**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (name of parent/guardian/legal carer) consent to

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (name of child) receiving medical treatment, including anaesthetic, which the medical authorities present consider necessary.

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

**Photograph Consent**

I …………………………………… (do/do not) allow Gala Cricket Club to take photographs of my child and use them for promotional purposes. (e.g. social media, club newsletters). *(Please delete as appropriate)*

Child’s name: …………………………………………

Signed: …………………………………….

Date: \_ \_ /\_ \_ /\_ \_

**Collection**

At the completion of all training sessions, my child will (return home on their own/be collected from the cricket club) and if there is any change to this I will inform the club’s Child Protection Officer immediately. *(Please delete as appropriate)*

Childs name: ……………………………..

Signed: ……………………………..

Date: \_ \_ / \_ \_ / \_ \_

**Child Protection Officer**

Gala CC’s Child Protection Officer is Bruce Robertson who can be contacted via cwpogalacc@gmail.com.

**Can I help?**

The club is run by many volunteers who provide varying amounts of time to help run the club.

We understand the time commitments of parents and guardians, but if you were able to spare an hour or two to help us it would be appreciated

Ways you can support the club include:

|  |  |
| --- | --- |
| Help support coaches at training sessions |  |
| Help taking coaching sessions |  |
| Driving club minibus to festivals and games |  |
| Helping at any games/tournaments |  |
| Other (any skills or experience you would be willing to provide the club) |  |

If you could help with any of the above, please comment or tick the boxes above.

You can also email galacricketclub@gmail.com.

**Membership Payment**

Junior player membership - £25 (or £30 if paid after 31 May 2023)

Please complete this form, and make sure you ‘save as’. Then return to Gala CC Membership Secretary Lorna Blake via:

Email: Lorna.Blake4@outlook.com

Post: 8 Bemersyde Crescent, Selkirk, TD7 4DH

**How to pay**

*Online*

Please pay your membership fee directly, or via bank transfer with your name in the reference to:

Account Name: Galashiels Cricket Club

Sort Code: 83-20-19

Account Number: 00160060

*In person*

Alternatively, please provide a cheque or cash to the membership secretary with your printed membership form.

Gala CC would like to keep you up to date on all its activities. Please tick this box if you wish to be kept up to date [ ]