

2017/2018 POOLE JUNIOR RUNNERS MEMBERSHIP APPLICATION FORM



"athlete centred and open to all"

Please complete this form and return it to either a club coach, or mail it to:

NB: Please ensure forms are returned in a sealed envelope and marked Private and Confidential:

PRIVATE & CONFIDENTIAL
Claire and Reinhard Lehmann,
39 Victoria Close,
Corfe Mullen,
Wimborne, Dorset,
BH21 3TX.

Club Member Details

Legal Name:

Likes to be known as:

Address:

..... Post Code:

Date of Birth: Gender: Male / Female*

E-mail address:

Mobile N°: Home N°:

School: School Yr:

Club Affiliation

A **First Claim member** is one who is eligible to compete for the club in all competitions. An athlete may only belong to one club as first claim.

Yes, this applies to my child, please sign him/her up as a **FIRST CLAIM MEMBER**

If your child is already a member of another athletics club, he/she you can join Poole Runners as a **second claim member**. Second claim members may only compete for Poole Runners events that their 'first claim' club are not competing in.

Yes, this applies to my child, please sign him/her up as a **SECOND CLAIM MEMBER**

If you wish to transfer your child's 'first claim' from one club to another there is a special form and procedure which must be adhered to under UKA rules. Please speak to a coach or other officer of the club if this is the case.

**Delete as applicable*

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Club Volunteers

The club relies entirely on the services of volunteers. Don't worry if you can't commit to offering any help, but if you think you might be able to help support the club by volunteering for events, or are willing to be contacted when your help may be needed, please indicate this below.

I would like to actively volunteer, feel free to contact me when events are coming up

I would like to volunteer but I think I will only be available sometimes, let me know if you're short of volunteers

I can't commit to volunteering, please don't ask, I will let you know when I can support events.

Any children attending events will be looked after to the same standards, whether volunteering or competing.

I am happy for my child to volunteer for events if they cannot compete

Payment of Club Fees

Club membership and track fees can be paid in several ways. In registering your child with the club, they may also be registered with England Athletics¹

Please indicate how you intend to pay your membership fees:

Monthly standing Order:

Cheque²:

Club Registration Fees:

Membership Fees	Amount
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1 April 17 – 31 March 18:	£20
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1 Nov 17 – 31 March 18:	£10
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England Athletics:	£14 per season
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Track Fees:

These can be paid in advance, or at training, £2.00 for each session.
£10 per month for 2 x sessions per week or more when paid via standing order
Sort Code: 40 -13 – 07 Account Number: 21837133
Account Name: Poole Runners Reference: Athletes name (ie: Mo Farah)

¹ It is a requirement of England Athletics that if you are or will be 11 years or over during this membership period and you want to compete in any EA registered event you must pay the EA registration fee each year.

You will be issued with an individual registration number by the EA. Most of the events or leagues that Poole Runners take part in would require you to be EA registered.

If you do not want your child to compete in any EA registered event either as a member of the Poole Runners Team or individually you do not have to pay the £15.00 fee.

² Please make cheques payable to: "Poole Runners" and hand it in to a Coach at training sessions in an envelope addressed to 'Claire and Reinhard Lehmann', or alternatively you can post it to the address at the top of this document.

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DATA PROTECTION ACT

The club and its officers are bound by the regulations of the Data Protection Act 1998. The information you have provided in this form will be treated confidentially and will not be disclosed to any unauthorised persons.

Access to the information will be made available to coaches and authorised officers of Poole Runners solely to facilitate club activities. Examples of this may include, but are not limited to:

- Race entry
- Club member demographic surveys
- UK Athletics Registration
- Parent Contact for the purposes of discussing Poole Runners activities or in an emergency

Parent/Guardian Details:

Please provide your full details below:

Name:

Relationship to athlete:

E-mail address:

Mobile N°: Home N°:

Emergency Contact Details

In the event of an emergency, who should we contact?

Name: Relationship: Contact N°:

Name: Relationship: Contact N°:

Name: Relationship: Contact N°:

Medical Information

Please list your child's medical conditions that the coaches or officers of the Club need to know about, including any medication currently being taken or must be relied upon in an emergency, or if there are any known allergies
If you have concerns about confidentiality or need to provide further details, please discuss these with your child's coach.

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GP Name: Surgery Contact Number:

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DECLARATION BY THE PARENT OR LEGAL GUARDIAN OF THE ATHLETE

Read and sign the following statements. If you have any concerns or need to highlight any conditions that you must attach to these statements, please make them known before, or at the time that you hand the form in.

1. Data protection, information management and confidentiality

I understand and accept how the information provided on this form will be managed and that if there are any changes, I will make the club aware by writing to Claire and Reinhard Lehmann and briefing club-coaches as soon as possible.

Signature:

Date:

2. Medical Management

My child is in good health and can take part in athletics training and events.

In the event my child needs FIRST AID or EMERGENCY MEDICAL/DENTAL TREATMENT when participating in events and training activities as a member of POOLE RUNNERS, any officer of the club or other adult acting on behalf of the activity, is authorised to ensure that appropriate medical or dental treatment is provided for my child, to protect their health and wellbeing.

Where the potential treatment requires intervention by healthcare professionals, I will be contacted using all reasonable methods, specifically using the contact details provided with this form; if I cannot be contacted, my authorisation extends to all necessary medical intervention including the prescription of any medication/anaesthetic necessary for the treatment of my child, if so deemed by an authorised healthcare professional and not previously contra-indicated.

Any changes to my child's medical status or the scope of this authorisation will be immediately communicated to the club.

Signature:

Date:

3. Liability

I understand that Club or Team personnel will take every reasonable precaution to prevent accidents from happening and that belongings are cared for. While club staff are conducting themselves within the stated scope of their role for the club I will not hold them liable for any loss or damage to equipment, or injury to my child.

Signature:

Date:

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4. The Use of Photography and Film

I am aware of and am satisfied with the club's policy regarding child protection, particularly that "Photographs, videos, or other images of young people will not be taken without the consent of the parent or guardian of the child".

I therefore consent to Poole Runners using photographic or video footage of my child's involvement in athletics. Once taken, the Club will take all reasonable steps to ensure that any images are used solely for reasons that support the promotion of the club, its events and activities only, including promotional material for club events where permission is given and within closed groups on Facebook.

If I become aware that images are being used outside of this remit, or I withdraw my permission for my child's images to be used in this way, I will communicate this to the club.

Signature:

Date:

5. Anti Bullying Policy

We are committed to providing a caring, friendly and safe environment for all our members so they can participate in a relaxed and secure atmosphere. Bullying of any kind is unacceptable at our club. If bullying does occur, all athletes or parents should be able to tell and know that incidents will be dealt with promptly and effectively. We are a **TELLING** club. This means that *anyone* who knows that bullying is happening is expected to tell the club welfare officer or any committee member.

Signature:

Date:

6. Adherence to Poole Runners & UKA Code of Conduct and Rules

I acknowledge and agree with the club's ethos of fair play and inclusion for all its members. I agree that a good standard of behaviour is expected always, from all members and their families, when attending events or training supported by the club. The club has published rules^[1] and adheres to the UKA code of conduct^[2] which applies to athletes, parents and coaches. I agree that my child will abide by these rules.

[1] The Club rules are available at <http://www.poolerunners.com> or from the club secretary

[2] The UKA Code of conduct is available from <http://www.britishathletics.org.uk/governance/welfare-and-safeguarding/guidance-documents-and-policy>, from coaches, or at the athletics track.

Signature:

Date:

ADMIN USE ONLY

Schedule of Fees:

How Fees are Paid:

Joining Date:

Membership Period: