



WOKING BLACKHAWKS BASKETBALL CLUB

www.wokingblackhawks.co.uk



Junior Member Registration - Season 2007-08

To register to join the Woking Blackhawks as a Junior member (under18 on the 1st September 2007) for the 2007-2008 season please complete the form overleaf and the payment section below. The cost of registration fees and personalised shooting shirts are being kept at the same cost as last year. Training session fees, which have not increased for the last three years, are being increased to £2.50 per hour and are in addition to the registration fees.

All members registered with the Club will be registered with England Basketball that allows them to compete in competitions run under the control of England Basketball. The England basketball membership provides a level of personal insurance whilst training, playing, coaching or officiating. For payment of an additional premium 'Personal Accident Top Up' is available – please ask for details or look on the membership section of www.EnglandBasketball.com.

The club is a not-for-profit organisation and all funds received are ploughed back into the club for player equipment and development once England Basketball and local league registration fees have been paid. All the coaches and committee officers are volunteers and claim no expenses.

Don't forget to keep up to date with all the club news, match reports and training schedules by regularly visiting our website at: www.blackhawks.co.uk

Thank you for joining us, and we look forward to seeing you at our matches.

Keith Farmer

Chairman

Costas Rakitzis

Head Coach

Payment Details

Players Name _____

	<u>Tick Below</u>	<u>Amount Payable</u>
Under 12 Registration * - £30 (under 12 on 1 st September 2007)	<input type="checkbox"/>	-----
Under 18 Registration * - £35 (under 12 on 1 st September 2007)	<input type="checkbox"/>	-----
Personal Accident Insurance Top Up - £15	<input type="checkbox"/>	-----
Shooting Shirt - £25 Circle below the chest size you require 32, 34 , 36 , 38 , 40 , 42 , 44 , 46 , 48 , 50	<input type="checkbox"/>	-----
Total Payable		-----

Payment by Cash or Cheque payable to Woking Blackhawks Basketball Club. Please return this form with payment a 2 passport sized photographs to a committee member

For Committee Use

Money Rec'd - ____

Photographs Rec'd ____

Registration Number _____



LOTTERY FUNDED



WOKING BLACKHAWKS BASKETBALL CLUB

Junior Member Registration, Medical and Consent Form - Season 2007-08



To be Completed for all U18 members - Please Complete in **BLOCK LETTERS**

First Name	Last Name	Gender M/F
Date of Birth	School Year	Squad (select code from list below)
Address House Number or Name _____ Street _____ Town _____ County _____ Post Code (must be provided) _____		Squad Key U12 under 12 boys & girls U14B under 14 boys U14G – under 14 girls U16B – Under sixteen boys U16G – under sixteen girls Sen M – Senior Men Sen L – Senior Ladies
		Ethnic Origin (select code from list)
		Ethnic Origin Key WB British White WI Irish White WO Other White MBC Mixed white & black Caribbean MBA Mixed white & black African MA Mixed White & Asian MO Mixed other I Indian P Pakistani B Bangladeshi C Chinese AO Other Asian BC Black Caribbean BA Black African BO Black other
		<i>Gender and Ethnic Origin are required by England Basketball Registration and are also used in grant applications</i>
Home Telephone	Player's or Parent Mobile	Player's or Parents Email
Emergency Contacts	Name	Telephone No
First Contact		
Second Contact		
Medical Details -Please inform us of any conditions and/or self-administered medication that may affect the player participating in rigorous training and playing a physical game of basketball. Please use the back of this form if necessary.		
Doctor's Name:		Tel No

Basketball Qualifications – please tick below any Basketball qualifications the member has gained.

Table Official Level 1		Table Official Level 2	
Referee Level 1		Referee Level 2	
Coach Level 1		Coach Level 2	
Junior Basketball Leaders Award			
Other			

Consent:

1. I give my consent for my child to take part in the activities of Woking Blackhawks Junior Basketball Club, and acknowledge that he/she undertakes basketball and associated activities at my/their own risk and responsibility.
2. I give my consent for the administration of basic first aid treatment by coaches.
3. I give my consent for my child to be taken to hospital in the event of an emergency.
4. I give my consent for the administration of any emergency medical treatment to my child in the event that I am unable to be contacted.
5. Pictures of my child engaged in Club activities may be made available by the Club to the local press or published on the Club's or related sports internet sites with the sole intention of promoting youth sport and the interests of the Club. If you do not want your child's picture used please tick here -
6. The Club uses email as one of its main communication medium. I give my consent for the email addresses provided to be used for Club communication. The Club will not release the above information to any third party without prior permission.

I declare that the above information is correct.

Signed: Parent/Guardian (Please delete as appropriate)

Print: Date:



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