



# WOKING BLACKHAWKS BASKETBALL CLUB

www.blackhawks.co.uk



## Girls and Junior Ladies Registration Form – Season 2016/17

Woking Blackhawks is a not-for-profit organisation with all profits reinvested in player equipment, court hire and development. All our Coaches and Committee Members are volunteers.

All new members must complete this form, send us a recent photo (or two if you are a NL player) and pay a one-off registration fee. Existing players must also complete a new form each season and submit a recent photo but need not pay a registration fee. All members of the Club are registered with our National Governing Body, Basketball England, allowing participation in those competitions run under their control.

The 2016-17 playing season runs from September 2016 to June 2017. Subscriptions are paid on a monthly basis the costs cover training and associated costs. These payments are to be made by the first training session of the month. Match fees are payable by those selected to play for the relevant teams. These must be paid on the day. Non - payment of either subscription or match fees will invalidate membership

### Personal Accident Insurance Top-Up

The Basketball England membership provides an automatic basic level of personal accident insurance whilst training, playing, coaching or officiating. For payment of an additional premium, a Personal Accident Top-Up is available to give an enhanced level of personal accident benefits. The benefits include a small loss of usual income benefit – please see the membership section of [www.basketballengland.co.uk](http://www.basketballengland.co.uk) for details.

Thank you for joining Woking Blackhawks. If there are any questions please do not hesitate to ask your Team Manager, Coach or any Committee Member and don't forget to keep up to date with all the Club news, match reports and training schedules by regularly visiting our website: [www.blackhawks.co.uk](http://www.blackhawks.co.uk).

**Iain Taylor**

**Chairman**

**Costas Rakitzis**

**Head of Youth Basketball**

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### Payment Details

Registration for new/lapsed members: **£ 40.00** (*due with registration form*)

Please set up a bank standing order payment using the details below:

#### Bank Details

Account Name: **Woking Blackhawks (Youth)**

Bank: **HSBC**

Sort Code: **40-35-45**

Account Number: **81625616**

**Please use the following reference:** *Squad Code Player's First Name & Last Name (eg U12 Joe Bloggs)*

#### For Committee Use

Money Rec'd \_\_\_\_\_

Photographs Rec'd \_\_\_\_\_

Registration Number \_\_\_\_\_



# WOKING BLACKHAWKS BASKETBALL CLUB

## Youth Player Medical and Consent Form - Season 2016-17



To be completed for all U18 members in **BLOCK LETTERS**.

<b>First Name</b>	<b>Last Name</b>	
<b>Date of Birth</b>	<b>School Year</b>	<b>Gender (M/F)</b>
<b>Address</b> House No / Name Street Town County Post Code		<b>Squad Code (Tick appropriate)</b> <input type="checkbox"/> <b>U08G</b> – Under 8 Girls <input type="checkbox"/> <b>U10G</b> – Under 10 Girls <input type="checkbox"/> <b>U12G</b> – Under 12 Girls <input type="checkbox"/> <b>U14G</b> – Under 14 Girls <input type="checkbox"/> <b>U16G</b> – Under 16 Girls <input type="checkbox"/> <b>U18G</b> – Under 18 Girls
Player's email & mobile number		
Parent's email & mobile number		
Parent's email & mobile number		
Emergency contact name & number		
<b>Medical Details</b>		
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 under pressure. Please use the back of this form if necessary.		
Doctor's Name:		Tel No:

<b>Basketball Qualifications</b> – please tick any Basketball qualifications the member has gained.	Coach Level 1		Coach Level 2		Coach Level 3	
	Referee Level 1		Referee Level 2		Referee Level 3	
	Table Official Level 1		Table Official Level 2		Table Official Level 3	
	First Aid					
	Other					

**Consent:**

1. I give my consent for my child to take part in the activities of Woking Blackhawks 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 or Team Managers.
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 cannot 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 media. 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.

**Payment Terms**

1. Registration fee of £40 is compulsory on an annual basis.
2. The monthly training fees are payable at the beginning of the month.
3. Game fees are payable by the players selected on the day of the game.
4. Non-payment of a monthly instalment will result in the player's membership being liable to cancellation with immediate effect. The player will then have to re-register should they wish to re-join at a later date.
5. There will be no refunds.
6. Special cases should be brought to the Squad's Head Coach and then to the Head of the Youth Programme, whose decision will be final.

I declare that the data I provided above is correct and agree with the terms outlined on this form.

Signed: ..... Parent/Guardian (Please delete as appropriate)

Print: ..... Date: .....



## WOKING BLACKHAWKS BASKETBALL CLUB



### Potential Sponsorship Contacts

The Club is continually looking for additional funding opportunities. If you know of a company and/or contact who may be interested in sponsoring the Club, please let us know.

**Contact Name:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Company:** \_\_\_\_\_ **Web Site:** \_\_\_\_\_

**Tel No:** \_\_\_\_\_

**Other Info:** \_\_\_\_\_



Visit our Club website: [www.blackhaws.co.uk](http://www.blackhaws.co.uk)