



EAST GLOS CLUB
TENNIS • SQUASH • HOCKEY

JUNIOR MEMBERSHIP APPLICATION FORM

In order to provide a safe club for all our junior members, and to keep you up to date with club activities we would like you to tell us some information about yourself.

PLEASE COMPLETE IN CAPITALS and get a parent or guardian to sign it if you are less than 16 years old.

First Name.....

Surname: Male/Female

ADDRESS

.....
.....

POSTCODE

DATE OF BIRTH

TEL NO : HOME

MOBILE

PARENT/GUARDIAN CONTACT DETAILS

NAME:

Relationship to Child:

Contact Numbers: Mobile.....

Work:.....

Email:.....

MEMBERSHIP CATEGORY

(Please tick appropriate box)

Junior 11–18

Automatic Dual Membership

(First choice sport) Tennis or Squash (please circle)

Junior 10 and Under

Automatic Dual Membership

(First choice sport) Tennis or Squash (please circle)

LTA Rating (if one)

Any medical conditions (asthma, allergies, etc) please use the box below to describe any special care needs, dietary requirements, allergies or medical conditions.

Which school do you attend?

.....

Playing Standard (please circle)

Beginner / Intermediate / Team Standard

Ethnic Monitoring :

White

Asian or Asian British

Mixed

How did you hear of East Glos Club?

(Please tick as appropriate)

Member Website Poster / Leaflet
Brochure Previous coaching at EG
Media Coverage Driving past / sign
Previous visit to club

Would you be interested in playing for an East Glos team

Yes No

Would you be interested in receiving coaching?

Yes No

Extract from Rules: The election of new members to the club is at the discretion of the committee. Tennis, Squash, Hockey subscriptions are due annually on the 1st January and must be paid in full by the end of the month.

Rule 10 Resignations. A member wishing to resign must do so in writing to the Secretary before the date on which the subscriptions are due. If a member has to leave the area owing to change of employment that member may apply for a pro rata refund. The Executive committee shall consider every case on its own merits. Reasons for any decision need not be divulged.

Copies of the rules may be obtained from the club office.

If you have advised us of your email address you will automatically be subscribed to receive e.news. If you do not want to receive it please tick here

Are you agreeable for your phone numbers being available to other members ? (Y/N)

Are you agreeable for your phone numbers to be accessible via E.G. website? (Y/N)

**Parent / Guardian declaration
(essential if applicant is under 16 years of age)**

By signing and returning this form, I agree to

.....child's name)
taking part in the general activities of the club. He/she has
agreed to follow the junior rules of the club, and I agree to
accept the code of conduct for parents.

To my knowledge, he/she has no special care needs, dietary
requirements, allergies or medical condition that could affect
his/her safety at the club, other than those declared on this
form. I understand that in the event of any injury, illness or
other medical need, all reasonable steps will be taken to con-
tact me, and to deal with the situation appropriately.

I understand that I must inform the club of any changes to
the information provided on this form.

Parent/Guardian Signature :

.....

Date:

Name:

I enclose £ Membership fee, which , I
understand will be refunded if I am not elected.

DATE OF APPLICATION

SIGNATURE

Office Use only:

Membership Card/ Byelaws/ Rules/ Paid/

Code of Practice—Parent / Code of Practice—Junior