

BITTESWELL CRICKET CLUB SENIOR MEMBERSHIP APPLICATION FORM 2025

(for players over the age of 18)

This form is designed to be completed by a player over the age of 18. If you are under 18, please use the Club's Junior Membership Application Form instead.

As the person completing or receiving this form, you must ensure each person whose information you include in this form knows what will happen to their information and to whom it may be disclosed. Details are set out in the Privacy Notice accompanying this form.

Once completed, the form should be returned to your team captain, vice captain or Rich Philpott (Hon Sec/Coach).

The Club uses the ECB's Play-Cricket system to store data. Data from this form may, therefore, be entered onto that system.

SECTION 1 (MANDATORY): PERSONAL DETAILS OF PLAYER / OFFICIAL			
All information in this Section 1 will be used by the Club and provided to the ECB and will be used and protected as described in the Privacy Notice below.			
Name	·		
Home address			
Post code			
Date of birth	(Day) (Month) (Year)		
Gender			
Email address:			
Home telephone number			
Mobile telephone number			
Are you interested in playing League Cricket?	Yes No If you answer 'yes', should you be selected by the Club to play us in a		
	League requiring player registration, relevant information from this Section 1 (including month and year of birth) will be provided to that League to enable them to check your eligibility to play in that League.		

If you are or become an official of the Club Boards or Leagues that the Club is a men matters.		·	
If you are a player and attend a County B fixtures), the Club may provide your nam them to notify you of arrangements.		•	
SECTION 2 (OPTIONAL): EMERG	ENCY CONTACT DETAILS		
Name of an adult who can be contacted in an emergency	Phone number of named adult	Relationship which this person has with you	
SECTION 3 (OPTIONAL): SPORTII		<u> </u>	
Have you played cricket before: Yes	No		
If yes, where has this been played?			
Club School Local authority coaching session(s) University			
Other (please specify)			
SECTION 4 (OPTIONAL): DISABILITY By providing the information in this Section 4, you are giving your explicit consent to the Club using this information (and any additional disability information provided by or for you) for statistical purposes as well as to establish if there are any additional needs / support / adjustments that you may requires.			
The Equality Act 2010 defines a disabled person as anyone with 'a physical or mental impairment, which has a substantial and long-term adverse effect on his or her ability to carry out normal day-to-day activities'.			
Do you have any physical or mental healt months or more? Yes N	h conditions or illnesses that have last		
Does this disability or illness affect you in Vision impairment Hearing impairment Mobility impairment Dexterity impairment Learning impairment Memory impairment Mental health impairment Stamina, breathing or fatigue impair Developmental impairment Has other type of impairment, pleas	ment		

SECTION 5 (OPTIONAL): MEDICAL INFORMATION		
By providing the information in this Section 5, you are giving your explicit consent to the Club using this		
information (and any additional medical information provided by or for you) to help you when you participate		
in cricket activities.		
Please detail below any important medical information that our club volunteers need to know and which would be affected by your participation in cricket activities. Such as: allergies; medical conditions (for example-		
epilepsy, asthma, and so on); current medication; special dietary requirements, any additional needs, and/or		
any injuries. Please indicate if you would like to discuss this privately with us.		
Name of doctor/surgery name		
Doctor's telephone number		
Medical consent:		
I consent to my medical details to be shared with coaches/leaders for the purposes of the delivery of my		
safe participation in Club activity.		
If you do not give your consent, this will not affect your membership of the Club. However, giving us consent		
to share this information will help Club coaches and leaders to know how to respond effectively in the case of		
any medical emergency.		
SECTION 6 (MANDATORY): PLAYER PARTICIPATION AGREEMENT:		
I agree to taking part in the activities of the Club.		
I confirm I have read, or have been made aware of, the Club's policies concerning:		
Changing / showering Anti bullying and the code of conduct		
And bullying and the code of conduct		
Transporting children		
Photography / video Social media, text and email		
I understand and agree to the responsibilities which I have regarding these policies		
SECTION 7 (OPTIONAL): CLUB PHOTOGRAPHY/VIDEO CONSENT		
Leapsant to the Club photographing or vide sing my involvement in cricket in line with the Club		
I consent to the Club photographing or videoing my involvement in cricket in line with the Club photography/video policy.		
photography race pointy.		
If you do not give your consent, this will not affect your membership of the Club. If you choose not to give		
consent, please contact us to discuss how we can manage any potential photography.		

	se ensure that you have read the Club's Privacy Notice carefully to see now the Club will use and protect personal data, who it may be disclosed to and why and your rights in respect of your personal data.
PLA	YER DECLARATION
	By returning this completed form, I confirm that I have read and understood the permission statements on this membership form and the Privacy Notice below.

Bitteswell Cricket Club takes the protection of the data that we hold about you as a member seriously and will

ensure that the data you provide is processed in accordance with data protection legislation.

SECTION 8: PRIVACY STATEMENT:

Date:

*PLEASE NOTE THAT A COPY OF THE BITTESWELL CRICKET CLUB PRIVACY NOTICE IS AVAILABLE ON REQUEST OR ALTERNATIVELY IS DISPLAYED ON THE NOTICE BOARD IN THE CLUB PAVILION.

Signature:

*PLEASE ALSO NOTE THE CLUB SAFEGUARDING OFFICERS ARE:

Carolyn Hubbard - 07773 374883 or cazzalove@hotmail.com

Richard Philpott - 07768 914452 or rpottster@gmail.com