

Squad	
Fee paid	

Junior Player Profile Form - 2011

This form is designed to be completed by the Parent or Legal Guardian of any junior player under the age of 18. It should also be signed by the player.

Once completed, the form should be returned to the appropriate age group administrator.

Data protection

The Club will use the information provided on this form (together with any other information it obtains about the junior player) (together "Information") to administer the junior player's cricketing or related activities with the Club and to provide care and supervision for such activities.

In some unusual situations the Club's administration, care and supervision may require the Club to disclose the Information to County Boards, Leagues and to the England and Wales Cricket Board. In the event of a medical issue or child protection issue arising, the Club may disclose certain information to doctors or other medical specialists and/or to other appropriate authorities or advisers who may become involved in such matters.

As the person completing this form, you must ensure that each person whose information you include in this form knows what will happen to their information and how it may be disclosed.

SECTION 1:

Personal details for junior player and their parent or guardian

Name of Child (under 18)	Child's Date of Birth	Name of Parent(s) or Guardian(s)
Home address	Postcode	Preferred Email address for everyday contact
Home telephone number	Work telephone number(s)	Mobile telephone number(s)

<p>SECTION 2: Emergency contact details</p> <p><i>In the event of an incident or emergency situation, where a parent or guardian named above cannot be contacted, please provide details of an alternative adult who can be contacted by the Club. (Please make this person aware that his or her details have been provided as a contact for the Club.)</i></p>		
Name of an alternative adult who can be contacted in an emergency	Phone numbers for alternative named adult	Relationship which this person has to the child (e.g. Aunt, neighbour, family friend etc.)
<p>SECTION 3: Disability</p> <p><i>The Disability Discrimination Act 1995 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'.</i></p>		
Do you consider this child to have a disability? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, what is the nature of their disability? <input type="checkbox"/> Visual impairment <input type="checkbox"/> Learning disability <input type="checkbox"/> Other (please specify): <input type="checkbox"/> Hearing impairment <input type="checkbox"/> Multiple disability <input type="checkbox"/> Physical disability		
<p>SECTION 4: Sporting information</p>		
Has this child played Cricket before? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, where has this been played? <input type="checkbox"/> Primary school <input type="checkbox"/> Club (please state which): <input type="checkbox"/> Secondary school <input type="checkbox"/> County <input type="checkbox"/> Other (please specify): <input type="checkbox"/> Local authority coaching session(s)		
<p>SECTION 5: Medical information</p> <p><i>Please detail below any important medical information that the Club may need to know (e.g. allergies, medical conditions, current medication, dietary requirements, injuries)</i></p>		
Name of Doctor / Surgery Name		Doctor's Telephone number

Consent Statements from Parent / Legal Guardian

Please tick each box where you agree (or delete if you do not agree).

Legal authority to provide consent:

- I confirm that I have legal responsibility for _____ (Name of Child) and am entitled to give this consent.
- I confirm that to the best of my knowledge, all information provided on this form is accurate, and that I will undertake to advise the club of any changes to this information.

Consent to participate:

- I agree to the child named above taking part in the activities of the Club.

Parental consent:

- I give my consent that in an emergency situation, the Club may act in loco parentis, if the need arises for the administration of emergency first aid and / or other medical treatment which in the opinion of a qualified medical practitioner may be necessary. I also understand that in such an occurrence that all reasonable steps will be taken to contact me or the alternative adult named in section 2 of this form.
- I confirm that to the best of my knowledge, my child does not suffer from any medical condition other than those detailed by me in section 5 of this form.
- I confirm I have read, or been made aware of, the Junior Section's '**Operating Policies and Codes of Conduct**' and the Club's '**Child Protection Policy and Guidelines**'.
- I understand and agree to the responsibilities which I and my child have in connection with these policies and in particular agree to abide by the terms of the Code of Conduct for Parents/Carers.
- I consent to the photographing or videoing of my child's involvement in cricket under the terms of the Junior Section's Photography/Video Policy.
[NOTE: THIS BOX SHOULD BE LEFT UNTICKED IF YOU DO NOT AGREE]

Signed (parent or guardian):

Date of signing:

Print name of person who has completed this form:

Consents From Child

(For players aged 12 – 18 – players under 12 are not being asked to give photography consent)

- I consent to the photographing or videoing of my involvement in cricket under the terms of the Junior Section's Photography/Video Policy.
[NOTE: THIS BOX SHOULD BE LEFT UNTICKED IF YOU DO NOT AGREE]
- I have read and agree to comply with the terms of the Code of Conduct for Junior Players.

Signed (child)

Date of signing: