



# Colchester Hockey Club Membership Form

All prospective members of Colchester Hockey Club are required to complete this registration form. All details will be kept secure with access restricted to authorised officers only. If you have difficulty paying the full amount please contact the Treasurer in confidence: 01206 510722. Kindly complete both sides of this form and send it with your Membership fee to:

**Ben Harrington, CHC Treasurer, The Red House, 29 Wimpole Road, Colchester, CO1 2DL**

Please make cheques payable to: Colchester Hockey Club.

**Membership fees and match fees for this coming season. Age breaks are defined as of 1st September.**

Category	Membership fee	Match fee	If membership fees are paid after 30th September, and you have already played league games, then they will be:
19 or over (playing league hockey)	£100	£10	£115
Under 19 / Full-time student	£50	£5	£60

## SECTION ONE: Member Contact Details

Surname:		First name(s)		Payment enclosed:	
Home address:					
POSTCODE:					
Home phone number:		Mobile number:		Date of birth:	
Shirt number (current players):		Email address:			

## SECTION TWO: Medical Information and Consent

(To be completed by PARENT or LEGAL GUARDIAN if under 18)

In case of emergency and as part of the Colchester Hockey Club responsibility to its membership, ALL members are required to complete this medical information form as accurately as possible. Details will be held securely with access restricted to authorised officers only.

Next of kin:		Relationship:		Phone number:	
As far as you are aware, are you allergic to any medication?					
Are you taking any regular medication? If so, for what reason?					
Do you have any long term illnesses or injuries?					

DECLARATION: I consider [myself/my son/daughter]\* to be physically fit and capable of full participation and agree to notify the Colchester Hockey Club of any changes to the medical information provided. Furthermore, in the event of injury I give my permission (for myself/my son/daughter)\* for the team managers/coaches appointed by Colchester Hockey Club to obtain emergency medical treatment. Please delete as appropriate where indicated by a \* then sign and date below.

Signed:		Date:		Relationship:	

### SECTION THREE: Under 18 member consent (to be completed by PARENT or LEGAL GUARDIAN)

It is a requirement of Colchester Hockey Club's policy that parental/legal guardian consent is provided for participation, transportation and photography. The Colchester Hockey Club's Safeguarding and Protecting Young People Policy is available on the website. Please delete as appropriate where indicated by a \* then sign and date below.

TRANSPORTATION: I consent to my son/daughter\* travelling to venues for matches and training, in transport provided by the club, which may include travelling in other players' private cars.

PHOTOGRAPHY: In some environments, particularly adult competition, it is impossible to control photography by external parties. However, I am aware that there may be times that photographs and/or footage may be taken during matches and training sessions by approved agents and/or officers of Colchester Hockey Club. Such images shall only be used for publicity/training purposes in accordance with the Colchester Hockey Club Safeguarding and Protecting Young People Policy and Photography Policy and I give consent for my son/ daughter to feature in such photos/images. I hereby only grant approved agents the right to use the images resulting from the photo/film shoots. This includes any reproductions or adaptations of the images for all general purposes, e.g. local newspapers, local magazines, other promotional articles (including flyers) and the club's website.

Signed:	Date:	Relationship:

### SECTION FOUR: Club statistics

England Hockey requests this data from clubs as part of the annual affiliation process. Please tick ALL the boxes that apply.

Player	Coach	Umpire	Other (ie. Sunday volunteer, life member – please specify)					
Female	Male	Age:	5-11	12-16	17-18	19-21	22-44	+45

### SECTION FIVE: Ethnicity and disability

Information in this section is optional and will be used for development purposes only.

	TICK		TICK
White British		Asian or Asian British – Pakistani	
White Irish		Asian or Asian British – Bangladeshi	
White Other		Asian or Asian British – Other	
Mixed – White and Black Caribbean		Black or Black British – Caribbean	
Mixed – White and Black African		Black or Black British – African	
Mixed – White and Asian		Black or Black British – Other	
Mixed – Other		Chinese	
Asian or Asian British - Indian		Other Ethnic Group	

	TICK		TICK
Deaf		Physical disability	
Visually Impaired		Learning disability	
Hearing Impaired		Multiple disability	