

**JUNIOR MEMBERSHIP FORM ADDENDUM
OXSHOTT VILLAGE SPORTS CLUB**

NAME OF CHILD.....**DATE OF BIRTH**.....

SPORTING INFORMATION

Have you played before? Yes No
(Insert your sport here)

If yes, where have you played the sport: (please indicate below)

Primary school

Secondary school

Local authority coaching session (s).....

Club.....

County.....

Other (please specify):
.....
.....

MEDICAL INFORMATION

Please detail below any important medical information that our coaches/junior coordinator should be aware of (e.g epilepsy, asthma, diabetes, etc.)
.....
.....

**EMERGENCY CONTACT DETAILS – TO BE COMPLETED BY
PARENT/GUARDIAN**

Please insert the information below to indicate the person(s) who should be contacted in case of an incident/accident:

Contact name (e.g parent/guardian):

Emergency contact number:.....

Netball only:-

Please advise if you agree to let the Netball section add your child's details to the England Netball website address (for affiliation purposes)

By returning this completed form, I agree to my child taking part in the activities of the club.

I understand that I will be kept informed of these activities – for example timing and transport details.

I understand that in the event of any injury or illness all reasonable steps will be taken to contact me, and to deal with that injury/illness appropriately.

Name of parent/guardian:

Date: