

YOU MUST REGISTER YOUR CHILD BEFORE THE FIRST SESSION

North Enfield Cricket Club Junior REGISTRATION / PERMISSION FORM 2024

Please complete this form and return it at the first session on 19th April completing all the sections. Please note that all information given is confidential.

	Name	Date of Birth	Male /Female
1 st Child			
2 nd Child			
3 rd Child			
4 th Child			

Name of Parent / Guardian: _____

Address: _____

Email address: _____

Telephone Number _____

Signed _____

Date _____

Player/s must be in school Year 1 to be eligible to join.

Rates for Junior Membership and coaching at North Enfield Cricket Club are detailed in the attached letter.

I would like my child (children) to attend the Junior training sessions at North Enfield and give permission for them to take part Club activities including (where applicable) matches. I/We have made a direct payment / enclosed cash or Cheque for the sum of:

£_____.

**North Enfield Cricket Club
Business Community Current Account
Sort Code 23-05-80 Account Number 49363613**

Direct Payment via the bank is really appreciated.

Please include **Full Name / Subs** in the reference field and please WhatsApp nick on 07930 644783 email nickmunt@uwclub.co.uk to confirm the payment you must include all players names so we can update our records.

Please make cheques payable to North Enfield CC

Please return all completed forms and to;

North Enfield Cricket Club Juniors
C/o Nick Munt
20 Hatton Road
Cheshunt, Hertfordshire

MEDICAL DECLARATION INFORMANTION

I _____ (Parent/ Guardian) of child / Children
named below:

1 st Child	
2 nd Child	
3 rd Child	
4 th Child	

hereby give my consent for any emergency medical or surgical treatment which may be professionally recommended and administered to be given to my child whilst he / she is under the charge of North Enfield Cricket Club.

I declare to the best of my knowledge that my son / daughter is in good health and fit to fully participate actively in the coaching sessions provided.

My son/ daughter is receiving the following **medication**

Please give details below of **any illnesses** or symptoms your child is liable to suffer from **allergies** to drugs or other substances, history of illness or injury:

DECLARATION

I do / do not give permission for photos/videos to be taken of my child/ren during normal club activities and to be used in North Enfield Cricket Club promotional material, Club website or Social Networking sites.

I confirm I will adhere to the Club Rules and Code of Conduct (which can be found on the Club website) and ensure my child/children and any guests of mine at Club events will adhere to these.

Signature of Parent/ Guardian: _____ **Dated** _____