



Section 1 – Personal Details

Name:

Address:

Daytime phone number:

Evening phone number:

Mobile phone number:

E-mail:

Section 2 – Emergency Contact Details (Alternative Contact)

In the event of an incident or emergency situation, please provide details of someone who can be contacted by the club. Please make this person aware that his or her details have been provided

Name:

Relationship to member:

Address:

Daytime phone number:

Evening phone number:

Mobile phone number:

E-mail:

Section 3 – Medical Information

Name of Doctor / Surgery:

Surgery phone number:

Please detail below any important medical information that our coaches and team captains should be aware of (e.g. epilepsy, asthma, diabetes, current medication, injuries etc.)

Section 4 - Medical consent:

- I give my consent that in an emergency situation the club may act in my place, (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 all reasonable steps will be taken to contact the emergency contact named in section 2.
- I confirm that to the best of my knowledge, I do not suffer from any medical condition other than those detailed above.

Signed:

Date:

Please return this form with £30 cash or cheque (payable to Saltwood Cricket Club) for £30. BACS payment to Sort Code 40-25-25 Account Number 51694804 – Use surname as payment reference.

Post to.....Ian Oakes – 34 Tanners Hill Gardens, Hythe, CT21 5HX.

Saltwood Cricket Club - Tanners Hill - Saltwood