



# WOKING BLACKHAWKS BASKETBALL CLUB

www.wokingblackhawks.co.uk



## Senior Member Registration - Season 2018-19

Welcome to the Woking Blackhawks. Please read the below information regarding your registration.

2018-19 season club membership will continue to be paid by a monthly subscription into the Club Senior Section bank account.

Members must complete this form and pay an initial monthly instalment when handing the form in. Subsequent ongoing monthly payments will be due by the 7<sup>th</sup> of each month starting the following month after completion of the form. **Membership fees are payable regardless of attendance. Any unsanctioned break in payments will result in a suspension of club membership.**

All members registered with the Club will be registered with our National Governing Body – Basketball England. This allows members to compete in competitions run under the control of Basketball England.

**Data Protection.** Please refer to the Club's Privacy Notice on the Club website ([www.blackhawks.co.uk](http://www.blackhawks.co.uk)) for details of how the Club uses the personal data provided to us on this form.

**The club is a not-for-profit organisation.** All funds received are reinvested in the club for player equipment, court hire, local league and BE registration and club development. All the coaches and team managers are volunteers and claim no expenses.

Don't forget to keep up to date with all the club news, match reports and training schedules by regularly visiting our website at: [www.blackhawks.co.uk](http://www.blackhawks.co.uk)

Thank you for joining us. If you have any questions please do not hesitate to ask your Team Manager, Coach or any Senior Committee Member.

**Rick Lansdell**

Head of Senior Basketball

### Payment Details

Squad	Reg Fee	Monthly Payments
Men – Wessex	£ 36.00	£ 36.00
Ladies – Wessex	£ 36.00	£ 36.00

Players Name \_\_\_\_\_

Squad Code - **HU** (Hunters) **TA** (Thunder A) **TB** (Thunder B) **SL** (Ladies) (please circle as appropriate)

Initial payment due with registration form of £ \_\_\_\_ (due with registration form)

Subsequent monthly payment of £ \_\_\_\_ (payable by the 7<sup>th</sup> of each month)

Please set up a standing order payment to Woking Blackhawks using the details below

### Bank Details

Account Name – **Woking Blackhawk Basketball Club Senior**

Bank **HSBC** Sort Code – **40-35-45** Account Number – **81625624**

Please use Reference '**Squad Code**' + *your surname* - e.g. **HU Bloggs**

### Potential Sponsorship Contacts

The Club is continually looking for additional funding opportunities; If you know of a Company and/or contact who may be interested in sponsoring the Club please include their details below.

Company \_\_\_\_\_ Web Site \_\_\_\_\_

Contact Name \_\_\_\_\_ Email \_\_\_\_\_ Tel No \_\_\_\_\_

Other Info \_\_\_\_\_

### For Committee Use

Money Rec'd - \_\_\_\_ Photographs Rec'd \_\_\_\_ Registration Number \_\_\_\_\_



# WOKING BLACKHAWKS BASKETBALL CLUB

Senior Member Registration, Medical and Consent Form - Season 2018-19



To be Completed for all members **over 18** - Please Complete in **BLOCK LETTERS**

First Name *		Last Name *		Gender *
Date of Birth *		Squad Code (see list below right)	Ethnic Origin Code * (see list below)	
Address *		<b>Ethnic Origin Key</b> <b>W</b> British White <b>WI</b> Irish White <b>WO</b> Other White <b>MBC</b> Mixed white & black Caribbean <b>MBA</b> Mixed white & black African <b>MA</b> Mixed White & Asian <b>MO</b> Mixed other <b>I</b> Indian <b>P</b> Pakistani <b>B</b> Bangladeshi <b>C</b> Chinese <b>AO</b> Other Asian <b>BC</b> Black Caribbean <b>BA</b> Black African <b>OB</b> Black other <b>OT</b> other ethnic group	<b>Squad Codes</b> SL - Ladies HU - Hunters TA - Thunder A TB - Thunder B  <i>Gender and Ethnic Origin are required by Basketball England Registration and are also used in grant applications</i>	
House Number or Name				
Street				
Town				
County				
Post Code * (must be provided)				
Home Telephone				
Players Mobile				
Players Email				
Emergency Contacts	Name		Telephone No	
First Contact				
Second Contact				
<b>Medical Details</b> -Please inform us of any conditions and/or self administered medication that may affect you participation in rigorous training and playing a physical game of basketball. Please use separate sheet if necessary.				
Doctor's Name:		Tel No		

Basketball Qualifications – please tick adjacent any Basketball qualifications the member has gained.	Table Official Level 1	Table Official Level 2
	Referee Level 1	Referee Level 2
	Coach Level 1	Coach Level 2
	Other	

### Consent:

- I agree to take part in the activities of Woking Blackhawks Basketball Club, and acknowledge that I undertake basketball and associated activities at my own risk and responsibility.
- I agree to abide by the rules and codes of conduct of the Club and Basketball England
- I give my consent for the Club to hold the medical details provided on this form.
- I give my consent for the administration of basic first aid treatment by coaches.
- I give my consent to be taken to hospital in the event of an emergency.
- The Club uses email as one of its main communication medium. I give my consent for the email addresses provided to be used for Club communication.

### Payment Terms

- Registration fees count as first payment. Subsequent payments to be paid by 7th of month following registration
- The club will need a month's notice before a standing order can be cancelled
- Membership fees are payable regardless of attendance.** Special cases should be brought to the squad Coach and then to the Head of the Seniors Programme, whose decision will be final
- Non payment of a monthly amount will result in the player's membership being liable to cancellation with immediate effect

I declare that the above information is correct.

Signed: ..... by player

Date: .....

\* Please Ensure These Entries are completed