**Membership Registration**

**2017­2018 Season**

# MEMBER DETAILS

Name............................................................................... Date of Birth................................

School.............................................................................. School Year..................................

# CONTACT INFORMATION

Name of Parent/Guardian................................................................................................................

Home Address..................................................................................................................................

Home Telephone............................................................. Mobile.........................................

E­mail address..................................................................................................................................

# EMERGENCY INFORMATION

Does your child have any medical conditions or allergies that we should be aware of?

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Please provide an emergency contact name and telephone number.

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# PHOTOGRAPH/VIDEO CONSENT

We may wish to take photographs/videos of your child for use in promotional materials (including our website and noticeboard) and to improve our coaching.

 Please **tick** **this box** if you **DO NOT WISH** your child to be photographed.

**COLLECTION ARRANGEMENTS** Please tick the appropriate box.

 Allowed to leave the venue without an adult.

 Collected from inside the venue at the end of the class.

**PAYMENT** Please confirm your chosen method of payment of full amount

 Cheque enclosed  Bank transfer, made on................................

**Please use child’s name as reference.**

# CODE OF CONDUCT

* Parents/Guardians must ensure that term fees are paid within the time period specified. No refunds will be given if your child decides to withdraw from the club part way through a term.
* Parents/Guardians must ensure that suitable arrangements are made for their child to be collected at the end of each session and that the child is clear about these arrangements.

As the parent/guardian of a member of Haddington Junior Badminton Club I have read, understood and agree to abide by the Code of Conduct.

Signature......................................................................... Date....................................

**T-Shirt / Hoodie Order**

**2017­2018 Season**

**Name of Child:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Group:** | Tues / Weds | Beginner | Intermediate | Advanced | Progressive |

*Please circle group day and level so we can deliver order*

**CLUB TSHIRT ORDER**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Size:** | Age 7-8 | Age 9-11 | Age 12-13 | Adult Small / Large | **£10.00** |

**CLUB HOODIE ORDER**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Size:** | Age 7-8 | Age 9-11 | Age 12-13 | Adult Small / Large | **£20.00** |
| **Style:** | Zip-up (red contrast zip) | | Pull-Over | | |
| **Name on sleeve**  ……………………………………………………………………………………………..........................................................  *Please write name in CAPS. If you do not want a name printed on sleeve, leave blank.* | | | | | |

Name will be printed down Right arm. Please pay at the time of ordering. Due to the individual nature of the printing, hoodie orders will only be placed once payment has been received.

Please note that Adult Small covers age 14-15. Child pull-over hoodie will not have string toggles.

Any questions please email haddingtonjbc@gmail.com

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Cheque | Online | | Amount paid £ | |
| *Online payments please reference child full name.*  *Account number 00439692 Sort code 80-08-23*  *Please make cheques payable to Haddington Junior Badminton Club.* | | | | |
| Signed: | | Printed: | | Date: |