

## LEE VALLEY LIONS MEMBERSHIP FORM 2015-16



All members of Lee Valley Lions Hockey Club Junior Section are required to complete this Membership Form and return it with payment for the first term to the club secretary. All details will be kept in a secure database with access restricted to authorised club officers only.

New Member: Please complete all of this form and hand in with payment to the Club Secretary

### **SECTION ONE: Player and Parent / Carer Contact Details**

PLAYER			
First Name:			
Last Name:			
Date of Birth:			
Gender:			
MAIN PARENT / CARER CO	ONTACT DETAILS		
Name:			
Mobile:			
E-mail:			
2ND PARENT / CARER CO	NTACT DETAILS		
Name:			
Mobile:			
E-mail:			
ADDRESS AND MEDICAL DETAILS			
House No / Name:			
Street:			
District:			
Town:			
Postcode:			
Doctor:			
Surgery:			
Telephone:			
Any Allergies:			

Any Medications:	
Any Long Term Illness:	

# Please complete second page PLAYER NAME:

### SECTION TWO: Membership, training & match fee options

Membership	Description	Fee	Please Tick
Learn To Play*	TRY OUT Membership required NEW MEMBERS ONLY FOR 4WEEKS	Free	
Beginners	FULL Membership required for beginners - 8 WEEKS COURSE	£90	TERMLY
U12,U14,U16,U18	FULL Training for youth League fixture - CLUB MEMBERS ONLY	£60	MONTHLY

<sup>\*</sup>The Junior TRY OUT membership is available only to those who have not been members of the club before. Please make cheques payable to 'Lee Valley Junior Hockey Club' with players name on the back

### SECTION THREE: Health / Photography consent (to be completed by PARENT or LEGAL GUARDIAN)

It is a requirement of Lee Valley Lions Hockey Club policy that parental/legal guardian consent is provided. Please delete as appropriate where indicated by a \* then sign and date at the bottom.

**DECLARATION:** I consider my son/daughter\* to be physically fit and capable of full participation and agree to notify the Lee Valley Lions Hockey Club of any changes to the medical information provided. Furthermore, in the event of injury I give my permission for the team managers/coaches appointed by Lee Valley Lions Hockey Club to obtain emergency medical treatment for my son/daughter\*

**PHOTOGRAPHY:** I am aware that there may be times that photographs and/or footage may be taken during matches and training sessions by approved agents and/or officers of Lee Valley Lions Hockey Club. Such images shall only be used for publicity/training purposes in accordance with the Lee Valley Lions Hockey Club Safeguarding and Protecting Young People Policy and Photography Policy and I give consent for my son/ daughter to feature in such photos/images. I hereby only grant approved agents the right to use the images resulting from the photo/film shoots. This includes any reproductions or adaptations of the images for all general purposes, e.g. local newspapers, promotional articles (including flyers) and the club's website.

Signed:	Date:	Relationship:

The Lee Valley Lions Hockey Club Code of Conduct Guide will be provided to all members and is also available to download from the website. It lays out clearly what our members can expect from Lee Valley Lions and how they should report any issues they may have.

Please return with cheque made payable to Lee Valley Ice Hockey Club and hand in to Secretary.