

Livingston Cricket Club



Junior Cricket Membership Application Form

Why Join?

For You:

- Year round cricket – competitive games, training and development opportunities during the summer and winter.
- Being part of a great family club that provides positive cricket experiences for all its members.

For the Club:

- More Junior members give the whole club a boost and are a focus for the club and its long term development.
- The club will develop more coaches and volunteers and provide a more positive impact in our community.

What is the cost?

Practices are £3 per practice or £40 for a year's membership (October to September).

When does it take place?

Livingston Cricket Club's junior outdoor (April-September) cricket practices are on Wednesday evenings from 6-7.30pm at the following address: 10a Murieston Valley. Livingston. EH54 9HB

Livingston Cricket Club's Junior indoor (October-May) cricket practices are on Wednesday evenings 5-6pm for under 10's and 6-7pm for over 10's at the following address; Deans Community High School. Deans. Livingston.

All members should bring a water bottle, wear suitable shoes and clothing for running around in, and any personal cricket equipment they would like to use (equipment is provided by the club if needed).

How to apply?

Simply complete the form on the next page, along with the medical and consent forms, and bring it with you to a junior coaching session or post it to the Junior Convenor at the details provided.



Junior Registration Form

First Name: _____

Second (Family) Name: _____

Address: _____

Post Code: _____

Home Telephone Number: _____

Mobile Telephone Number: _____

E-mail Address: _____

Date of Birth: _____

School: _____

Emergency Contact Name: _____

and Relationship to you (e.g. mother): _____

Emergency Contact Phone Number: _____

2nd Emergency Contact Phone Number: _____



Medical Consent Form

Consent to Medical Treatment:

The following information and consent is requested to ensure the health and well-being of all children and vulnerable adult's participating in Livingston Cricket Club's activities. The information contained in this form is confidential and will only be used to safeguard and promote the child/vulnerable adult's health and well-being should the need arise.

Name of child/vulnerable adult:

Date of Birth: _____

Please provide details of any pre-existing medical conditions that may affect the child/vulnerable adult's participation in the activity/event programme: _____

Details of medication or treatment required: _____

Details of any existing injuries (include when injury occurred and treatment received): _____

Details of any allergies, including allergies to medication: _____

Parent/Guardian/Legal Carer

I, _____ (name of parent/guardian/legal carer) consent to _____ (name of child/vulnerable adult) receiving medical treatment, including anaesthetic, which the medical authorities present consider necessary. I undertake to inform Livingston Cricket Club should any of the information contained in this form change

Signature: _____ Date: _____

Name: _____

Relationship to child/vulnerable adult: _____



Consent Form for use of Photographs

Consent Form for the use of photographs, film or video recordings of children or vulnerable adults. Livingston Cricket Club is committed to the protection of children and vulnerable adults involved in sport. In accordance with its Child and Vulnerable Adults Protection Policy and procedures where possible we will not permit photographs, film or video or other images of children or other vulnerable adults to be taken or used without the consent of the child/vulnerable adult and their parent/guardian or carers.

Livingston Cricket Club will take all reasonable measures to ensure these images are used solely for the purposes for which they are intended. If you become aware these images are being used inappropriately you should inform Livingston Cricket Club's Child Protection Officer immediately. Livingston Cricket Club reserve the right at all times to prohibit the use of photography, film or video at any activity with which it is associated.

Child/Vulnerable Adult

I, _____ (child/vulnerable adult) consent to photographing, filming or videoing my involvement in Livingston Cricket Club activities

Signature: _____

Name: _____

Date: _____

Parent/Guardian/Carer

I, _____ (parent/guardian/carer) consent to Livingston Cricket Club photographing, filming or videoing

_____ (child/vulnerable adult's name) involvement in Livingston Cricket Club activities

Signature: _____

Name: _____

Relationship to child/vulnerable adult: _____

Date: _____