



Philadelphia Cricket & Community Club

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🌐 www.philadelphiacc.co.uk

📘 www.facebook.com/PhiladelphiaCCC/

🐦 twitter.com/PhiliCC

📷 www.instagram.com/philadelphia_ccc/

Adult Player Membership Form

NOTE

In this form:

- 'the Club' refers to the Philadelphia Cricket & Community Club, and, where the context allows, any official of the Philadelphia Cricket & Community Club, e.g. Committee member, team coach/manager etc and any other appointed person(s) working on behalf of the Philadelphia Cricket & Community Club.

This Adult Player Membership Form should be completed by a player over the age of 18.

As the person completing this form, you must ensure each person whose information you include in this form knows what will happen to their information and to whom it may be disclosed.

Therefore, the adult player privacy notice should be read in conjunction with this form.

The Club uses its own manual and computerised business systems and the ECB's Play-Cricket system to store data and, therefore, some data from this form will be stored in those systems.

Section 1 - Membership Category (MANDATORY)

		Tick
Full-Time Education Player	(Payment by standing order can be arranged on request)	
Midweek Player	(Payment by standing order can be arranged on request)	
Senior Player	(Payment by standing order can be arranged on request)	

Section 2 - Personal Details (MANDATORY)

All information in this Section 2 will be used by the Club and provided to the ECB and will be used and protected as described in the Club's privacy notices.

Name	Forename	
	Surname	
Home Address	Line 1	
	Line 2	
	Line 3	
	Post Code	
Gender		
Date of Birth		
Home Telephone Number		
Mobile Telephone Number		
Email Address		

If you are or become an official of the Club, the Club may provide the information in Section 2 to County Boards/Leagues that the Club is a member of or affiliated to, to enable them to contact you about cricket matters.

If you attend a County Board/League run event (such as trials, nets or representative fixtures), the Club may provide the information in Section 2 to the relevant County Board/League to enable them to notify you of arrangements.

Section 3 - Emergency Contact Details (Alternative Contact) (MANDATORY)

In the event of an incident or emergency situation, please provide details of an alternative adult who can be contacted by the Club. Please make this person aware that his or her details have been provided as a contact for the Club.

Name	Forename	
	Surname	
Address	Line 1	
	Line 2	
	Line 3	
	Post Code	
Gender		
Date of Birth		
Home Telephone Number		
Mobile Telephone Number		
Email Address		
Relationship to Player		

Section 4 - Cricket Experience Information (MANDATORY)

Have you played cricket before?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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		Tick
If 'Yes', where have you played cricket at?	Primary School	
	Secondary School	
	Special Educational Needs School	
	Local Authority Coaching Session(s)	
	Club	
	County	
	University	
Other (please specify)		

Section 5 - Disability Information (MANDATORY)

By providing the information in this Section 5, you are giving your explicit consent to the Club using this information (and any additional disability information provided by or for you) for statistical purposes as well as to establish if there are any additional needs/support/adjustments that you may require. The Equality Act 2010 defines a disabled person as anyone with 'a physical or mental impairment, which has a substantial and long-term adverse effect on his or her ability to carry out normal day-to-day activities'.

Do you have any physical or mental health conditions or illnesses that have lasted or are expected to last 12 months or more?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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		Tick
If 'Yes', does this condition or illness affect you in any of the following areas?	Vision Impairment	
	Hearing Impairment	
	Mobility Impairment	
	Dexterity Impairment	
	Learning Impairment	
	Memory Impairment	
	Mental Health Impairment	
	Stamina, Breathing or Fatigue Impairment	
	Developmental Impairment	
	Other (please specify)	

If you have ticked any box above, please provide us with any additional information that will assist us to ensure you are fully supported whilst at the Club.

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Section 6 - Medical Information (OPTIONAL)

By providing the information in this Section 6, you are giving your explicit consent to the Club using this information (and any additional medical information provided by or for you) to help you when you participate in cricket activities.

Please detail below any important medical information that the Club needs to know and which would be affected by your participation in cricket activities, such as: allergies; medical conditions (for example, epilepsy, asthma, and so on); current medication; special dietary requirements, any additional needs, and/or any injuries. Please indicate if you would like to discuss this privately with us.

Name of Doctor		
Name of Practice		
Address	Line 1	
	Line 2	
	Line 3	
	Post Code	
Telephone Number		

Please detail below any important medical information that the Club should be aware of, e.g. epilepsy, asthma, diabetes, current medication, injuries etc.

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Section 7 - Medical Consent Agreement (MANDATORY)

I consent to my medical details to be shared with the Club for the purposes of the delivery of my safe participation in Club activity.	<input type="checkbox"/> Yes <input type="checkbox"/> No
If you do not give your consent, this will not affect your membership of the Club. However, giving us consent to share this information will help the Club to know how to respond effectively in the case of any medical emergency.	
I confirm that to the best of my knowledge, I do not suffer from any medical condition other than those detailed above.	<input type="checkbox"/> Yes <input type="checkbox"/> No

Section 8 - Player Participation Agreement (MANDATORY)

I agree to taking part in the activities of the Club.	<input type="checkbox"/> Yes <input type="checkbox"/> No
I understand that in the event of injury or illness all reasonable steps will be taken to contact my alternative contact, and to deal with that injury/illness appropriately.	<input type="checkbox"/> Yes <input type="checkbox"/> No
I confirm I have read or have been made aware of the Club's policies, procedures and privacy notices and I agree to abide by them at all times.	<input type="checkbox"/> Yes <input type="checkbox"/> No

Section 9 - Club Photography And Video Consent (MANDATORY)

I consent to the Club photographing or videoing my involvement in cricket in line with the Club's photography and video policy.	<input type="checkbox"/> Yes <input type="checkbox"/> No
If you do not give your consent, this will not affect your membership of the Club. If you choose not to give consent, please contact us to discuss how we can manage any potential photography and video.	

Section 10 - Data Protection And Privacy Statement

The Club takes the protection of the data that we hold about you as a member seriously and will ensure that the data you provide is processed in accordance with data protection legislation.

Please read the Club's policies, procedures and privacy notices, which can be viewed on the Club's website at <https://www.philadelphiacc.co.uk/documents>, to understand how the Club will use and protect your personal data, who it may be disclosed to and why and your rights in respect of your personal data.

Section 11 - Player Declaration (MANDATORY)

I confirm that to the best of my knowledge all information provided in this form is accurate and I will inform the Club of any changes to this information in a timely manner.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Name	
Signature	
Date	

Thank you for applying to become a member of Philadelphia Cricket & Community Club.

All Club policies, procedures and privacy notices referred to in this form can be found on the Club's website at <https://www.philadelphiacc.co.uk/documents>.

You can change your details at any time by emailing us at philadelphia.ccc@gmail.com.