



Feathers Junior Badminton Club.

Junior Essential Information Form 2016-2017 Season

To ensure your child can take part in badminton safely, please complete and sign this form then return it to the Club Secretary within two weeks. All the information given on this form is held in strict confidence, however names & addresses need to be submitted to Badminton England for affiliation purposes, this we will do automatically unless specifically requested not to.

Parents and Carers, please ensure we always have the correct and upto date health and contact details by completing this form, signing and returning back to the Club Secretary. Thank You.

Member Name

Address

Postcode

Home telephone number

Parent/Carer Mobile,
First Emergency Contact

Alternative
Emergency Contact
Person & Number

Parent/Carer Email

Date of Birth

School

Year

The Administration Fee.

Covers affiliation to BADMINTON England and OBA.

2016-2017 Season the fee is £ 5.00 per member.

Please Pay when returning the completed form.

Date Paid & Coach initial

Subs. £ 2.50 per session attended.

Feathers Junior Badminton Club is specifically a club for Children under the age of 18 years old, run by the committee using suitable qualified coaches and volunteers.

Membership is subject to the Committee's acceptance and approval.

DISABILITY

The Disability Discrimination Act 1995 defines a disabled person as anyone with ‘a physical or mental impairment, which has a substantial long-term adverse effect on his or her ability to carry out normal day-to-day activities.

Does your child have a disability? Yes No







If yes, what is the nature of the disability?

Visual impairment Hearing impairment
Physical disability
Learning disability Multiple disabilities

Other (please specify):

MEDICAL INFORMATION

Please detail below any important medical information or any issues that our coaches/club welfare officer should be aware of (e.g. epilepsy, asthma, diabetes, food allergies etc.)

-  By returning this completed form, I agree to my son/daughter/child in my care taking part in the activities of the club.
-  I understand that I will be kept informed of these activities – for example timing and transport details.
-  I understand in the event of injury or illness all reasonable steps will be taken to contact me, and to deal with that injury/illness appropriately.
-  I understand that it is my responsibility to inform the Club Secretary immediately if any of the details given in this form change.
-  Club Code of Conducts for Junior Members and Parents/Carers/Spectators are to be adhered to; these are available from our website feathersjbc.org.uk
-  Photographs could be taken during tournaments / training sessions and may be used for promotional purposes but will not be used on any published documentation.

Signature of parent/carer:

Date: