

Boys and Girls
Under 18 on 1st September 2010
Membership Form 2010/2011



www.chilternbasketball.co.uk

Forename

Surname

Address

.....

Post Code

Date of Birth Age School Year

School Attending

Medical conditions
(information for coach)

Phone (Home) Mobile

Contact Name

Email address
 Please ensure that this is an address which is checked regularly as it will be used to inform you of match details, Club news, training changes, etc.

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Emergency Contact Details

1 - Name Phone No

2 - Name Phone No

We may, from time to time, use player or team photographs on the official Chiltern Basketball Club website or in the Club newsletter. No personal information will be shown.

Please tick here if you **do not** give permission for photographs of your child to be used.

I give permission to take part in playing basketball.
 for (name of player)

Signed

We have to give information to Wycombe District Council regarding the ethnic origin of our players. It would be helpful to us if you could indicate below your child's ethnicity. Please tick one of the five main categories listed on the left; the sub categories on the right hand side will help you decide which category is the best fit.

- | | | |
|-----------------------------|--------------------------|---|
| White | <input type="checkbox"/> | British, Irish, any other white background |
| Mixed | <input type="checkbox"/> | White and Black Caribbean, African, Asian or other mixed background |
| Asian or Asian British | <input type="checkbox"/> | Indian, Pakistani, Bangladeshi or any other black background |
| Black or Black British | <input type="checkbox"/> | Caribbean, African or any other black background |
| Chinese, other ethnic group | <input type="checkbox"/> | Chinese or any other ethnic group not listed above |