**Athlone Hockey Club**

**Membership Application Form 2017/18**

**Personal Details:**

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Male/Female\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Class/Year \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone numbers: Text: re matches (etc) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Emergency\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parents Roster :**

Athlone Hockey Club is committed to safeguarding the wellbeing of all participants - as the club is

growing in size parents help is necessary to ensure the club can continue to function in the best interests of all members. To this end we will be rostering ALL parents to help on occasion – this may be at a regular training session or at matches wherever adult supervision is required in line with health and safety legislation.

**If you are unable to be included on a parents roster please circle the non-rostered column below and unfortunately an increased subscription fee will apply.**

**Age Category /Membership Basis**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Group** | **Yr of Birth** | **Rostered Parent (please circle)** | **Rostered Parent Fee (please circle)** | **Non-rostered Parent Fee (please circle)** |
| U10 | 2008/later | Y / N | €120 | €140 |
| U12 | 2006/07 | Y / N | €140 | €160 |
| U14 | 2004/05 | Y / N | €170 | €190 |
| U16 | 2002/03 | Y / N | €185 | €205 |
| Senior Student  10% Discount\* | 2001 and before  With valid 3rd Level Student Card | Y / N | €195  €175\* | €215  €195\* |
| Senior (Non Student Rate) | 2001 and before | Y / N | €220 | €240 |
| Boys Club | 2nd Class and up | Y / N | €140 | €160 |
| Junior Family Rate | All family members born 2002 or later | Y / N | €345 | €365 |
| Senior Family Rate | Any family member born 2001 or before | Y / N | €395 | €415 |

***Please note:***

1. ***There will be a charge for buses to away matches.***
2. ***As the Club facilitates both girls and boys, mixed hockey games may be played.***
3. ***€50 deposit on registration, balance to be paid in September – only fully registered/paid up players are insured. We cannot allow uninsured players to train or play. Please contact Hockey Club in advance of playing year if you are unable to complete final registration***

**Medical Disclosure:**

It is important to disclose any medical condition that may affect participation in sport. All members are requested to inform their manager of any serious medical condition. In the case of under-age members, certain medical conditions may require that a guardian is present at training/competition to ensure the safety and/or correct administration of medicine in the event of it being required. To this end, the committee will determine membership based on this understanding. The responsibility of child welfare is that of both guardian and club.

Medical history information (details of any known allergies, conditions, medications, special needs etc)

**Insurance:**

Athlone Hockey Club has Public Liability Clubcare Medical cover. Due care should be exercised by all members of the club to ensure that incidents do not occur. To this end, it is **compulsory** for members to wear personal protective equipment/clothing, gum shields, remove jewellery, wear appropriate footwear and take all necessary precautions to avoid exposure to injury/harm.

**Reporting of Accidents:**

If your child is injured while participating in hockey and requires medical attention/treatment please notify the relevant Team Manager/Coach immediately as our insurance company will need to be advised - failure to do so may mean that insurance cover will be declined.

**Parental/Guardian Consent:**

In working with young people Athlone Hockey Clubs first priority is the welfare of young people.In promoting good practice everyone involved must read, understand and apply in full the Clubs Code of Conduct Policy.

**Please read the Code of Conduct Policy which can be downloaded from the club website *www.athlonehockeyclub.ie* and place an ‘X’ in the boxes below. If these boxes are not checked your application will be invalid.**

|  |  |
| --- | --- |
| **I have read, understood and agree to abide by the Code of Conduct for Parents** |  |
|  |  |
| **I can confirm that my son/daughter has read, understands and agrees to abide by the Code of Conduct for Players** |  |

**From time to time the club may wish to take videos and/or photographs for placing on the**

**club website or for promotional reasons or for coaching training purposes. This process**

**will strictly adhere to the guidelines contained in the Irish Sports Council's Code of Ethics**

**and Good Practice for Children’s Sport.**

|  |  |
| --- | --- |
| **I agree to photographs and/or videos being taken and the use of photographic and video material by Athlone Hockey Club** |  |

|  |
| --- |
| **In the event of illness, I give permission for medical treatment to be administered where considered necessary by a nominated first aider or suitably qualified medical practitioner.**  **If I cannot be contacted and my child needs emergency hospital treatment, I authorise**  **a qualified medical practitioner to provide emergency treatment or medication.** |

**Signed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (parent/guardian) Date : \_\_\_\_\_\_\_\_\_\_\_\_**

**Fee Paid : \_\_\_\_\_\_\_\_\_\_\_\_ Cash/Cheque Receipt No : \_\_\_\_\_\_\_\_\_ Date : \_\_\_\_\_\_\_\_\_\_**

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