

# KESWICK AC JUNIOR MEMBERSHIP FORM



## Keswick AC (KAC) Equal Opportunities Statement

KAC aims to ensure that all people have a genuine and equal opportunity to participate in running at all levels and in all roles. That is as a participant, coach, administrator or official.

## **Junior Membership Application**

I wish to apply for membership of the junior section of the Keswick Athletic Club and, if elected, agree to abide by all the rules of the club, North of England Athletic Association and Fell Runners Association. I also agree that the data contained within this application form may be stored in electronic form and made available to officials of KAC, and that my name, address, phone number and email address may be included on the list and circulated to all members of KAC.

FULL NAME:

DATE OF BIRTH:

PLACE OF BIRTH:

ADDRESS:

POST CODE:

TELEPHONE:

MOBILE:

E-MAIL:

ARE YOU A MEMBER OF ANY OTHER ATHLETIC CLUB?

SCHOOL YEAR:

SCHOOL:

SIGNED:

Date:

## **PLEASE COMPLETE THE IMPORTANT INFORMATION OVERLEAF**

SEE EXPLANATORY NOTE BELOW. PLEASE RETURN THIS COMPLETED FORM WITH A MEMBERSHIP FORM & REGISTRATION FEE.

## **CHILD SUPERVISION**

Most of the time your child will be under your supervision at Club events. However, in the event of an accident or other occurrence out of your sight, or in your absence, it may be necessary for Club Officials, helpers, or other adult runners to provide assistance. If you could fill in any relevant details in the form over the page, the information could be of help to us in an emergency.

KAC recognises the common law requirement of any Club Coaches, Officials, or helpers, in the absence of a parent/guardian, to provide such assistance as might be provided by a parent.

There is currently a whole web of regulations regarding supervision of young people, with which KAC is doing its best to comply. All our Club Officials who deal directly with Juniors for warm-ups & other coaching activities are cleared through the correct agencies to carry out such supervision. If you have any queries on these matters, please contact the Club

NAME:		RELATIONSHIP TO JUNIOR:
ADDRESS & PHONE (if different from on Membership Application page):		
TELEPHONE:		MOBILE:
ALTERNATIVE CONTACT		
<b>MEDICAL INFORMATION</b>		
Does your child have any specific medical conditions requiring treatment and/or medication?		
Yes	If yes, please give any relevant details:	
No		
Does your child have any allergies?		
Yes	If yes, please give details:	
No		
Does your child take any medication for asthma?		
Yes	If yes, please give details:	
No		
Is there any other medical information concerning your child that may be relevant to their participation?		
<p><b>It may be essential at some time for the Club Coach or Team Manager supervising your child to have the necessary authority to obtain any urgent treatment which may be required whilst at Club competition or training. Would you therefore complete the details on this form and sign below.</b></p>		
<p>I, _____ being parent/guardian of the above named child hereby give permission for the Club Coach or Team Manager to give the immediately necessary authority on my behalf for any medical or surgical treatment recommended by competent medical authorities, where it would be contrary to my child's interest, in the doctor's medical opinion, for any delay to be incurred by seeking my personal consent.</p>		
<p>Photographs of Junior runners are regularly taken at events and used for Club Newsletters &amp; Newspaper reports etc. If you do <b>not</b> wish any photographs of your child(ren) to be used in this way please place an X in this box: <input type="checkbox"/></p>		
<p>I confirm that I have received details of the activities of KAC Junior section and consent to my child taking part in the events and activities indicated. I acknowledge that KAC will be liable in the event of any accident <i>only if they have failed to take reasonable steps in their duty of care for my child during the activities</i>. I understand that the club coaches and other helpers have a common law duty to act in my absence in the capacity of a reasonably prudent parent.</p>		
SIGNATURE:		(& please print name):
DATE:		