

Junior Membership Form 2024/26



TITANS



PHOENIX

Junior Membership Form 2024/26

Player Details			
Full Name:		Date of Birth:	
Ethnicity:		Home Telephone No:	
Email:		Mobile No:	
Address (incl. Postcode):			
School / College		Gender:	Height:
Any Known Disability Yes <input type="checkbox"/> No <input type="checkbox"/>		Shirt Size:	
If yes please specify:			
Parents/ Guardian/ Emergency/ Contact Details			
Name:		Relationship:	
Email :		Contact No:	

Registration Details

Anyone who wishes to play at any level of competition for the club needs to be a club member and registered with Basketball England.

Please tick relevant box below: (Fees Start September 2024)

I hereby acknowledge and agree that by opting for the instalment plan, I am making a commitment to fulfil the total season fee for my membership, irrespective of the method of payment or its instalment nature. I understand that any failure to honour this commitment may result in appropriate actions taken by the club.

- | | | |
|---|--|--------------------------|
| National League U14, U16 & U18 Boys or Girls | £150* + £37.50 monthly x 18 months (£825.00) | <input type="checkbox"/> |
| Training Only U10, U12, U14 & U16 Boys or Girls | £150* + £25 monthly x 8 months (£600.00) | <input type="checkbox"/> |
| John Roan Basketball Academy Membership | £100* + £25 monthly x 18 months (£550.00) | <input type="checkbox"/> |
| National League U14, U16 & U18 Boys or Girls | £750* Upfront All Inclusive (max of 2 instalments) | <input type="checkbox"/> |
| Non – Members £10 per session | | <input type="checkbox"/> |

**The upfront payment will be required before players are registered with the team or be allowed to train.*

All players are expected to provide a copy of their passport or birth certificate and have a digital photo taken for their licence. Non-British passport holders will require additional clearance procedures.

Payment Details:

It is preferable that all money is paid by Standing Order which can be set up through your bank. The details are as follows:

Bank: Santander
A/C Name: Greenwich Titans
Sort code: 09-01-28
A/c No: 31049367

Reference should be your child's name and a receipt will be provided

Please indicate how you wish to pay monthly subs:

Standing Order (**Preferred**) on the 1st of Every Month

1st of the Month by Cash or Cheque

Declarations

In the event of any illness/accident, I agree to my child receiving medication as instructed and any emergency dental, medical or surgical treatment, including anaesthetic or blood transfusion, as considered necessary by the medical authorities present. I understand that I will be contacted as soon as is reasonably possible. I also understand that while the coaches will take every precaution to ensure that accidents do not happen, they cannot necessarily be held responsible for any loss, damage or injury incurred by my child.

Date	
Signature of Parent/Guardian	

Parental Permission (if player is under 18)

I give permission for my child to play for Titans Basketball Club and travel to the matches with the team in a parent's car, or Mini-bus or on public transport.

I will ensure my child is available for games on match days and attends training regularly.

Date	
Signature of Parent/Guardian	

Photography/Filming:

In accordance with our Safeguarding Policy, Photography Guidance and Photography and Video Advice (CPSU) we will not permit photographs, video or other images of young people to be taken without the consent of the parents/guardians and the child.

Titans Basketball Club will take all steps to ensure these images are used solely for the purposes they are intended. If you become aware that these images are being used inappropriately you should inform a member of staff immediately.

Consent Information	
I consent to Titans Basketball Club utilising my child's name, voice, statements, photograph, image, likeness, actions in any live or recorded form (including, but not limited to, any form of photography, video, display, web content or other transmission or reproduction), in whole or in part, for promotional, training, assessment of my child	
_____ (INSERT NAME OF CHILD)	
I can confirm that I have read, or been made aware of, the Titans Basketball Clubs photography and videoing policy.	
I can confirm that I have read or been made aware of how the organisation's will use these images or videos in future and how these images or videos will be stored within the organisation.	
To be completed by player:	
I consent to <u>Titans Basketball Club</u> sharing my contact details with other parties for the purposes of administering effective communication within the Club and for Club activities. This may include, but is not limited to, the use of WhatsApp and group emails. I am aware that my details will be visible to other parties through these communication tools.	
Signature of Player:	
Print name of Player:	
Signature of Parent/Guardian	
Print name Parent/Guardian	

If you have any specific requests relating to communication methods, please insert details here	
Date:	

DATA PROTECTION

Titans Basketball Club is committed to ensuring that personal information is protected and a copy of our Data Protection Policy can be found on our website. The use of WhatsApp and group emails has been a very effective communication tool over the last few years, allowing parents to receive updates on various matters including changes to training times, game changes, events etc. However, as these methods allow other parties to view your contact details, we will require specific consent if you would like to receive information in this way.

Consent Information	
<i>To be completed by parent/carer:</i> I consent to <u>Titans Basketball Club</u> sharing my contact details with other parties for the purposes of administering effective communication within the Club. This may include, but is not limited to, the use of WhatsApp and group emails. I am aware my details may be visible to other parties through these tools.	
<i>To be completed by player:</i> I consent to <u>Titans Basketball Club</u> sharing my contact details with other parties for the purposes of administering effective communication within the Club and for Club activities. This may include, but is not limited to, the use of WhatsApp and group emails. I am aware that my details will be visible to other parties through these communication tools.	
Signature of Player:	
Print name of Player:	
Date	
Signature of Parent/Guardian	
If you have any specific requests relating to communication methods, please insert details here	
Date:	

Please return the signed form to your coach or email admin@titansbasketballclub.com