Membership Form 2024/25

Standing Order (Preferred) on the 1^{st} of Every Month



Membership Form 2024/25

1st of the Month by Cash or Cheque

Player Details				
Full Name:	Date of Birth:			
Ethnicity:	Home Telephone No:			
Email:	Mobile No:			
Address (incl. Postcode):	<u> </u>			
Previous Club	Gender:	Height:	Shirt Size:	
Any Known Disability Yes No No	If yes please specify:			
Emergency Contact Details				
Name:	Relationship:			
Email:	Contact No:			
Registration Details Anyone who wishes to play at any level of competition for the club Please tick relevant box below: I hereby acknowledge and agree that by opting for the instalment	t plan, I am making a commit.	ment to fulfil th	e total season fee for my	
membership, irrespective of the method of payment or its instalm may result in appropriate actions taken by the club.	ent nature. I understand that	any failure to h	onour this commitment	
Student Membership	£100* + £25 month	ly x 8 months		
National League Men £100* + £40 monthly x 8 r		ly x 8 months		
National and Local League Men	£300* + £50 month	ly x 8 months		
Student Membership	£250* Upfront All II	nclusive		
National League Men	£300* Upfront All II	nclusive		
*The upfront payment will be required before playe	rs are registered with the tec	am or be allowe	d to train.	
All players are expected to provide a copy of their passport or bir passport holders will require additional clearance procedures alor			for their licence. <u>Non-Britis</u>	
Payment Details: It is preferable that all money is paid by Standing Order which co	an be set up through your ba	ınk. 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 name and a receipt will be provided Please indicate how you wish to pay monthly subs:				

Declarations

In the event of any illness/accident, I agree to 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 my emergenc
contact 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.

Date	
Date	
Signature of Player	
season. In the event that I wish to terminate macknowledge that a compensation charge of £9	and agree that my membership with Titans Basketball Club is a commitment for the entire y membership before the end of the season without mutual consent from the club, I 5,000 will be due. This compensation charge is intended to cover administrative costs and rmore, I understand that I will not be released from my membership obligations until the
Date	
Signature of Player	
photographs, video or other images of young p Titans Basketball Club will take all steps to ensu	otography Guidance and Photography and Video Advice (CPSU) we will not permit beople to be taken without the consent of the players. The purposes they are intended. If you become aware all you should inform a member of staff immediately.
Consent Information	
I consent to Titans Basketball Club utilising n	ny name, voice, statements, photograph, image, likeness, actions in any live or any form of photography, video, display, web content or other transmission or bional, training, assessment of me.
I can confirm that I have read, or been made	aware of, the Titans Basketball Clubs photography and videoing policy. aware of how the organisation's will use these images or videos in future and how the organisation.
I can confirm that I have read, or been made I can confirm that I have read or been made these images or videos will be stored within I consent to <u>Titans Basketball Club</u> sharing m communication within the Club and for Club	aware of, the Titans Basketball Clubs photography and videoing policy. aware of how the organisation's will use these images or videos in future and how
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I can confirm that I have read, or been made I can confirm that I have read or been made these images or videos will be stored within I consent to <u>Titans Basketball Club</u> sharing m communication within the Club and for Club emails. I am aware that my details will be vis	aware of, the Titans Basketball Clubs photography and videoing policy. aware of how the organisation's will use these images or videos in future and how the organisation. by contact details with other parties for the purposes of administering effective activities. This may include, but is not limited to, the use of WhatsApp and group

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 players 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			
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:			
Date			
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