

I hereby apply for / renew my membership of Bearsden Lawn Tennis Club and if accepted agree to abide by the rules of the club. I understand that membership details are held on computer database. This information is used for administration purposes only. Contact details may be shared with Committee members and Match Secretaries and will not be passed to any third party out with the Club. I give my consent to this. I HAVE READ THE CLUB'S PRIVACY STATEMENT ON THE WEBSITE.

SIGNATURE: _____

All **new** Senior/Adult Family members are entitled to a half hour free coaching session. Contact club coach Gordon Wilson on 07841 392699 or email gwtourtennis@gmail.com

FOR ALL JUNIOR / MINI MEMBERS, PLEASE COMPLETE DETAILS IN THE SECTION BELOW:

JUNIOR MEMBER DETAILS:

Please complete all four sections of this form.

PART 1: NAMES AND EMERGENCY CONTACT DETAILS

Name of member	Emergency Contact Details		
	Contact name	Relationship to member	Contact telephone number

PART 2: HEALTH AND SAFETY DISCLOSURE

Please complete details or write "none":

_____ (insert name or names) **has health/care issues** which could affect his/her safety at the club, e.g. diabetes, asthma, allergies, and of which the club should be aware.

Please provide details:

PART 3: PUBLICITY

I give permission for the above named junior / mini member(s) to be involved in any **publicity** (including the use of still or moving photographs) used by the club for training or promotion.

Yes No

PART 4: TERMS AND CONDITIONS OF MEMBERSHIP

By signing and returning this form, **I agree** that the above named junior (s) / mini tennis members:

- can take part in general club activities
- has agreed to follow the rules of the club applicable to junior members*

and **I agree to:**

- accept the code of conduct for parents*
- club policy on transport of players to Junior Matches*
- give permission for the information above to be stored on a database
- inform the club of any changes to the information provided on this form.

**available at www.bearsdenltdc.org.uk*

I understand that in the event of any injury, illness or other medical need, all reasonable steps will be taken to contact me, and to deal with the situation appropriately.

Parent/guardian's signature:

Date: