

**Player Contact Information (correct at September 2021)**

Please note that all communication is done via email, so you must provide an email address AND be prepared to read and respond to CLUB e mail requests.

Player's Name ..... Date of Birth .....

Name of School ..... School Year .....

**Emergency Contact Information: (please include mother & father's names)**

Contact 1

Parent/Guardian Name .....

Mobile Number ..... Home Telephone Number.....

Primary Email Address

Address .....

Postcode .....

Contact 2

Parent/Guardian Name .....

Mobile Number ..... Home Telephone Number.....

Second Email Address (if available) .....

Address (if different from above) .....

Postcode .....

**Medical Information about your child:**

Any conditions requiring medical treatment, including medication? YES/NO\*

If YES please give brief details.....

Please outline any special dietary requirements of your child and the type of pain relief medication that your child may be given if necessary.....

Name of Family Doctor ..... Telephone Number .....

Address of Doctor .....

**Declaration (Parent)**

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.

Signature..... Date .....

**Parental Consent for Basketball England Activities:**

Please note this consent covers all York Eagles Basketball club training sessions and match fixtures.

I agree to my child taking part in the activities described above and I acknowledge the need for them to behave responsibly.

**Use of Photographic and Recorded Images Consent Form**

This consent relates to all photographic images or recordings taken during Club Training and Basketball England Matches by pre-approved individuals.

I (name of parent/guardian)..... CONSENT / DO NOT CONSENT\* to York Eagles

recording images of my child for the sole use of club publicity in local/national press and the club website.

I also confirm that my child is not under a court order.

Signed ..... Date .....

\* Please delete as appropriate.