**CASTLE HEDINGHAM TENNIS CLUB**

**St James Street, Castle Hedingham,**

**Halstead, Essex**

**Established 1922**

**Affiliated to: Lawn Tennis Association**

**President: P Drury Esq Chairman: A Temperton Esq**

**Secretary: C Chater**

**Welfare officer: M Westrop:** [**madeleinewestrop@gmail.com**](mailto:madeleinewestrop@gmail.com)

**Junior Dismissal Form 2019**

**PERSONAL DETAILS OF JOINING MEMBER**

NAME: - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS: -\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

POSTCODE: - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\*E-MAIL ADDRESS: -\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

(This will be used to inform you of team selection, club events or any important information.)

HOME TEL NO: -\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MOBILE: -\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DECLARATION**

**1**.All players **MUST sign in and out** with the coach for every session.

**2**. By returning this completed form, I agree to my son/daughter in my care being dismissed from coaching and matches without me being present.

**3.** All of the above information will be treated as confidential and not passed on to any third party

without my written permission.

**4.**. By returning this form I understand that my son/daughter **MUST** wear appropriate clothing at all times, whether playing in an organized session or playing outside an organized session.

I accept that the coaching staff reserve the right to remove my son/daughter from

any activity within the Club if either of these are contravened in any way.

**NAME OF PARENT/GUARDIAN: -\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** (Please print)

**SIGNATURE OF PARENT/GUARDIAN: -**

**To be completed by the Young Player if 12 years or older – Or Parent/Guardian if under 12**

I ……………………………….………………….. **Consent / do not consent** to Castle Hedingham Tennis Club

photographing or videoing my/my dependants involvement in tennis under the above terms and

conditions.

I ……………………………….………………….. **consent / do not consent** to my name/my dependants name

and/or Club being published with any photograph in authorised Club/Event publications or Press

articles.

Signature ……………………………………………………….. Date ………………………………….

**Transport to matches and practice sessions**

Castle Hedingham Tennis Club policy is that parents or other responsible adults are responsible for

transporting players to and from all matches and practice sessions and therefore the Club will not be

registering Private Vehicles for the transportation of individuals in connection with any fixtures or

practice sessions arranged by the Club. The implementation of this policy is not intended to exclude

any player from participation and parents or guardians should contact the Club Welfare Officer (Maddie Westrop) ifthey have any problems with the transportation of players to matches or practice sessions.

**Club Changing Policy**

For players under the age of 18 playing in adult teams the following policy applies:

Young players uncomfortable with changing with adults are under no obligation to do so and are

advised to change at home

No adult team member will change in the presence of a child and all under 18’s will be given the

chance to change and leave the area (changing room) before adult members change.

**Consent by Parent/Legal Guardian - Please strike out the words, which you do not agree to.**

I consent to ………………………………………………………….. (name of young person) taking part in club

activities under the above terms and conditions and I confirm that I have legal responsibility for this

young person and am entitled to give this consent. I also confirm that I understand and accept the

Club’s policy on transportation. If this young player participates in adult tennist **he/she will change**

**at home / he/she can change at the club.**