



New Starter Form

Name:.....
Date of Birth:.....
Contact Number:.....
Email:.....
Post Code:.....
Ethnicity: White Mixed Black Asian Other Prefer not to say

In the event of a serious accident or injury please provide an emergency contact:

Emergency Contact Name:.....
Relationship:.....
Emergency Contact Number:.....
Relevant Medical Information:.....
.....

In the past 4 weeks, on how many days have you done 30 minutes of sport and/or recreational physical activity?

How did you first hear about us?
.....

Medical Declaration

Participating in dodgeball involves certain risks including the risks of physical injuries, damage to property and even death. I hereby certify that to the best of my knowledge I am physically fit, have sufficiently prepared or trained to participate in dodgeball, and have not been advised to not participate by a qualified medical professional.

Code of Conduct

In signing this form, I am also agreeing to abide by the Cheadle and Gatley Griffins Dodgeball Club Code of Conduct which is available for me to read on request and understand that I may be subject to disciplinary procedures should I break club rules and regulations.

Data Declaration

I have read the Data Privacy Notice attached to this form and understand that if I do not provide my personal data, my membership cannot be registered with the club as the club requires details of emergency contacts etc. for safety reasons.

I give Cheadle and Gatley Griffins Dodgeball Club permission to use my image or likeness online or in promotional materials

I understand that I can withdraw my consent at any time by writing to the club.

Signed:.....
Date:.....