



# NORTON MENS & LADIES HOCKEY CLUB

Norton (Teesside) Sports Complex,  
Station Road, Norton, Stockton-on-Tees  
TS20 1PE

Tel: (01642) 554031

[www.nortonhockey.co.uk](http://www.nortonhockey.co.uk)

Email : nortonhockey@hotmail.co.uk



## MEMBERSHIP REGISTRATION FORM

We are very pleased to welcome you to Norton Hockey Club.  
Please complete the following information and return with your payment to:  
Captains / Coach / Treasurer

*This information will be contained on a database for use by authorised club personnel only.  
We will also use this information to ensure that you are kept informed about club events.*

### PERSONAL DETAILS

Name: .....

Address: .....

..... Post code: .....

Home telephone number: .....

Mobile: ..... Email: .....

Date of birth: ..... Gender:..... Male  Female

In order to help the club monitor its membership and to comply with Sport England equity requirements, please tick one of the following boxes to identify your ethnic group:

- |                        |                       |                        |                       |
|------------------------|-----------------------|------------------------|-----------------------|
| White                  | <input type="radio"/> | Black or Black British | <input type="radio"/> |
| Mixed                  | <input type="radio"/> | Chinese                | <input type="radio"/> |
| Asian or Asian British | <input type="radio"/> | Other ethnic group     | <input type="radio"/> |

Do you consider yourself to have a disability? Yes  No

If yes, what is the nature of your disability? .....

Which school or college do you currently attend? .....

### SPORTING INFORMATION

Have you played hockey before? Yes  No

If yes, where have you played the sport? (please indicate below)

- |                                     |                       |        |  |
|-------------------------------------|-----------------------|--------|--|
| Primary school                      | <input type="radio"/> | Club   | <input type="radio"/>                        |
| Secondary school                    | <input type="radio"/> | County | <input type="radio"/>                        |
| Local authority coaching session(s) | <input type="radio"/> | Other  | <input type="radio"/> (please specify) ..... |

Are you a goalkeeper or interested in playing in goal? Yes  No

In order to provide personal development opportunities, would you be interested in courses on:

- |                     |                       |          |  |
|---------------------|-----------------------|----------|--|
| First Aid           | <input type="radio"/> | Umpiring | <input type="radio"/>                        |
| Leadership/Coaching | <input type="radio"/> | Other    | <input type="radio"/> (please specify) ..... |

**MEDICAL INFORMATION**

Please detail below any important medical information that our coaches/Youth Development Officer should be aware of (e.g. epilepsy, diabetes, allergies etc.) and note the treatment or medication required.

.....  
.....

What was the date of your last tetanus vaccination: .....

**FOR COMPLETION BY PARENT/GUARDIAN (If under 18)**

***EMERGENCY CONTACT DETAILS*** – PLEASE INDICATE THE PERSON(S) WHO SHOULD BE CONTACTED IN CASE OF AN INCIDENT/ACCIDENT:  
  
Contact name (e.g. parent/guardian) .....  
  
Emergency contact number: .....

We encourage parents to show an active involvement in the organisation of our club. Please indicate areas in which you may be able to assist below:

- Fundraising / Sponsorship
- Registration before/after training sessions
- Transport to away matches
- U14 Girls / U14 Boys / U16 Girls / U16 Boys Team Secretary
- Committee Membership  (Training available)
- Coaching / Coaching Assistance  (Training available)
- Umpiring  (Training available)
- Other (please specify): .....

**CLUB POLICIES**

As part of Norton Hockey Club’s Child Protection Policy, parental consent is required for photographs/video to be taken during matches, on the pitch side or at social events which may or may not include your child. These will be used for hockey purposes only and may be used on Norton Hockey Club’s website.

Do you give permission for photographs/video to be taken: Yes  No

Additional Comments: .....

By returning this completed form, I agree to my child taking part in the activities of the club including away fixtures. I understand that I will be kept informed of these activities – for example timing and transport details.

I have read the *Code of Conduct for Parents, Carers & Spectators* and agree to comply with it.

I understand that in the event of any injury or illness all responsible steps will be taken to contact me and to deal with that injury/illness appropriately.

In the event of the club being unable to contact me, I give consent for the Coach, Child Welfare Officer or First Aid Officer to act on my behalf.

Name of parent/guardian:.....

Signature of parent/guardian: ..... Date: .....

Signature of player (if over 18): ..... Date: .....

**Cheques should be made payable to “Norton Hockey Club”.**  
**Subscription fees must be paid by 31<sup>st</sup> October or within 2 weeks of joining the club if after this date.**