

## Market Harborough Chess Club

## Junior Membership Form

Annual Membership Fees are as follow:
Adults: £15
Concessions: £10*
Childs Details:
Name
Address
Date of Birth
School
Parents Details:
Name of Parent/Carer
Contact Number
Email Address
Emergency Contact:
First Contact:
Name
Relationship to Child
Contact Number
Second Contact:
Name
Relationship to Child

Contact Number.....

Name						
Relationship to Child						
Conser	ıt:					
1.	1. I will inform the leaders of any important changes to my child's health, medication or needs and also of any changes to our address or to any of the phone numbers given above.					
2.						
	first aider, if available, or medical treatment to be administered by a suitably qualified medical practitioner.					
3.	3. If I cannot be contacted and my child should require emergency hospital treatment, I authorise an adult leader to sign on my behalf any written form of consent required by the hospital. However, I understand that every effort will be made to contact me as soon as possible.					
4.						
Please	tick box if you would like to OPT OUT of club photos					
I confir	m that the details are to the best of my knowledge					
Name						
Signed						
Date						

Return to Romilly Ilersic at Market Harborough Conservative Club, The Lilacs, Fairfield Road, Market Harborough, LE16 9QQ.

Payments can be made by cheque, electronic bank transfer or cash.

Other Persons Authorised To Collect Child:

<sup>\*</sup> OAPs/unwaged/under 18s