

CAMBRIDGE JUNIOR CHESS & GO CLUB

Membership Form

[to be completed by parent/guardian]

CHILD'S DETAILS	Name	
	Date of birth	
	School	
	Details of any relevant medical condition	
PARENT'S DETAILS	Name	
	Address	
	Phone	
	Email	
OTHER EMERGENCY CONTACT	Name	
	Phone	

(Please tick as appropriate)

YES NO

In an emergency can your child be given urgent medical attention/taken to hospital?

<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

Would you be on a parents' rota to help provide supervision at the club?

Is your child allowed to go home from the club on their own?

Please note: The information you provide on this form will be stored securely on a computer. The information will not be shared with other organisations without your permission. We will only use it if we need to contact you, and to help us run the club. Our data protection policy is on our website (www.chessgo.org.uk)

Children may only attend club meetings without a parent if they are old enough / responsible enough not to leave the building during the meeting and not to run around inside the building. If a parent stays during a club meeting they are responsible for their child(ren) following these rules.

Signature of parent/guardian: _____

Date: _____