

ALL MEMBERS TO PAY A BASE FEE ~ New members do not pay a late fee ~				Member Type Code	Annual Fee Cost 2020/21	MEMBERS DETAILS PLEASE FILL IN CLEARLY IN BLOCK CAPITALS				No Mixed Payments DD Option or cheque	Add Annual Fee options from Base & Playing together to get total cost per name		
BASE FEE FAMILY - inclusive of 2 Adults + any children U18 (Playing / Non Playing)				A2	£78.00	Families - use same form & add all names below indicating which sport(s) required in Member Type column				* Child D.O.B	School	Member Type Code	COST
BASE FEE Single Adult 18 & over (P / NP)				A1	£57.00	Name 1 *							
BASE FEE Single Junior U18 (P / NP)				Jnr 1	£39.00	Name 2 *							
Non Players please indicate if you are a Team:-				Name 3 *									
Section				Name 4 *									
Manager				Name 5 *									
Coach				Name 6 *									
Umpire				Home Address				1. For Single payment DD – no set up fee		£0.00			
Referee				Town				2. For 6 mth DD option* + £10.00					
PLAYING FEES - in addition to the Base Fee -				Postcode				Total £					
Bowling Section Bowls Senior BS £74.00				Email Address of Consenting Adult responsible for DD payments or primary contact for club info:				Option 2. *You will be contacted by email to set up Direct Debit monthly payments to allow the Annual Fee to be paid in instalments over 6 months *					
>18 with a Student Card Bowls Student BST £58.00				Email Address of second adult:				Method of Payment/ Please indicate					
Bowls Junior U18 / U10 B10/B18 £35.00/£50.00				Home Phone/Mobile : (parents for emergency contact)				1. Direct Debit* Single					
Cricket Section *Cricket Senior CS £149.00				Emergency Contact Details : (e.g. grandparents)				2. Direct Debit* 6 mth		/ mth			
>18 with a Student Card *Cricket Student CST £78.00				Please return form with <b>payment: Cheque / DD / Bank Transfer option indicated to :</b>				3. Cheque					
Cricket Ladies/Girls CL £35.00				Gill McElnea, Membership Secretary, 8 Corton Lea, Ayr, KA6 6GJ				4. Bank Transfer					
*Cricket Junior U18 C18 £70.00				Due to no payments at the bar at present.				Bank details on info poster, please include Surname + Postcode as reference					
(Price Inc of T-shirt) *Cricket Junior U10 C10 £40.00				Cheques made payable to 'Cambusdoon Sports Club'				Date paid					
(Price Inc of T-shirt) * Football + Cricket U10's FC10 +£22.50 #				For Corporate / Affiliated Sports Clubs Membership : please email to <a href="mailto:cscsubs@yahoo.co.uk">cscsubs@yahoo.co.uk</a> for info				Option 1.*You will be contacted by email to set up Direct Debit Single Option to allow the Annual Fee to be paid in 1 instalment by invoice*					
* Football + Cricket U18's FC18 +£45.00 #				*For Direct Debit option add £10.00 for 6 payments + include email address for set up*									
(# can be added at any time during the year) Lump sum only				"Should a member seek to resign their membership during the course of the membership year then 60 days' notice must be provided during which period the membership fee is still applicable."									
*NB: C10's: £5 - C18's/Cricket Student: £20 - Cricket Senior: £40 - for season 2020 has been added to the above fees and is being collected on behalf of Ayr Cricket Club to assist with meeting their playing costs.				Email to: <a href="mailto:cscsubs@yahoo.co.uk">cscsubs@yahoo.co.uk</a>									
Football Section Cambusdoon Football Club				Please ensure it has been passed to CFC coaches before paying.									
(Adults only) Walking Football WF £15.00				Country Membership 50% reduction on all fees if living more than 50 miles from the club									
Plus £1.00/session for Walking Football members				* Child D.O.B to help coaches in allocating training groups									
(£3.00/session for non-Walking Football members)				Junior Consent form must be filled in and returned for permissions and medical info for coaches. No need for these at the moment   We will get them when we start back – Thanks									

**JUNIOR CONSENT FORM FOR ALLOWAY BOWLING CLUB - AYR CRICKET CLUB - 2020/21**

**Consent Form for the Use of Photographs, Film or Video Recordings of Children or Vulnerable Adults**

The Clubs named above are committed to the protection of children and vulnerable adults involved in sport. In accordance with our Child and Vulnerable Adults Protection Policy and Procedures where possible we will not permit photographs, film, video or other images of children or vulnerable adults to be taken or used without the consent of the child/vulnerable adult and their parents/guardians or carers.

The Clubs named above will take all reasonable measures to ensure these images are used solely for the purposes for which they are intended. If you become aware these images are being used inappropriately you should inform the Clubs named above Child Protection Officer immediately.

The Clubs named above reserve the right at all times to prohibit the use of photography, film or video at any activity with which it is associated.

Child(ren) / Vulnerable Adult(s)

Names of child(ren) .....

Parent / Guardian / Carer

I consent to the Clubs named above photographing, filming or videoing the above named child (ren)/vulnerable adult's involvement in bowling /cricket/football practice or games.

Signature: ..... Print Name: .....

Relationship to child (ren)/vulnerable adult(s): ..... Date: .....

**Medical Consent Form**

**Consent to Medical Treatment**

The following information and consent is requested to ensure the health and well-being of all children participating in the above named clubs' activities. The information contained in this form is confidential and will only be used to safeguard and promote the child's health and well-being should the need arise.

Name of Child(ren): .....

Name / Address / Telephone of General Practitioner:

.....

Please provide details of any pre-existing medical conditions that may affect the child's participation in the activity /event / programme:

Details of any medication or treatment required: .....

Details of any existing injuries (include when injury occurred and the treatment (received):

.....

Details of any allergies, including allergies to medication:

.....

Parent /Guardian /Legal Carer

I consent to ..... receiving medical treatment, including anaesthetic, which the medical authorities present consider necessary. I undertake to inform Alloway Bowling Club/ Ayr Cricket Club should any of the information contained in this form change.

Signature: ..... Print Name: .....

Relationship to child/vulnerable adult: ..... Date .....

**DECLARATION**

I give permission for my child(ren) to attend BOWLING /CRICKET coaching sessions and play in matches. I acknowledge that Cambusdoon Sports Club and/or it's' representatives cannot take responsibility for any loss or damage to person(s) or properties during these sessions or matches.

Signed ..... Print Name..... Relationship to child(ren)..... Dated.....