



Haslemere Border Athletics Club (HBAC) – Haslemere Border Young Athletes (HBYA)

Junior Membership Form Application

Welcome to HBYA and thank you for choosing to join our club. We look forward to welcoming you and your family. We are a running club open to athletes of any ability from 12 years of age and offer various trail, road and track coaching opportunities. To ensure we have the correct contact details for you, please fill out this form and return to membership@hbac.co.uk

SECTION A: MEMBER DETAILS					
First Name				Surname	
Pronouns (a word that substitutes for your na				So, we	
know what to call you. For example, he/him, she/her,			er,		
they/them					
Address					
			Postcod	е	
Telephone			Mobile Number		
(16 and over only)			(16 and over only)		
Date of Birth			Email Address		See Note below
			(16 and	over only)	
School Attending			Year		
County of Birth			Preferre	d Events	
What is your sex?	Fer	male			
* Required for competition					
	Ma	le			

SECTION B: PARENT/CARER DETAILS If you are under 18 years of age, please ask your parent/carer to complete the following:					
First Name			Surname		
Address	If different from above				
		Postc	ode		
Telephone		Mobile	e Number		
Email Address	See note below				



Please note: This is a required field, so England Athletics can invite you to access your MyAthletics portal to complete the registration process with them. England Athletics will not market to you without your express consent.

SECTION C: EMERGENCY CONTACT DETAILS					
Please insert the information below to indicate the persons who should be contacted in event of					
an incident/accident.					
1, Emergency contact	Name:				
Contact number(s)			Relationship:		
,					
2. Emergency contact	Name:				
Contact number(s)			Relationship:		
3. Travel consent	Name:				
Contact number(s)			Relationship:		
SECTION D: MEDICAL INFOR	MATION				
Please detail below any importa	nt medica	al information that ou	r leaders or coaches	should be aware of.	
This will help us support you du	ring club	activity.			
Any specific medical	No	Yes – please give o	details		
conditions?					
(e.g. epilepsy, asthma,					
diabetes, allergies, etc.)					
Details of medication required					
(e.g. pills, inhaler, diabetes)					
Are there any health conditions	No	Voc. places give s			
Are there any health conditions that might prevent you/your	No	Yes – please give o	ietaiis		
child for taking part in training?					
Do they have any allergies?	No	Yes – please give o	details		



SECTION E: ADD	DITIONAL SUPPORT
Please detail belo information here:	w any additional support you may require. If you are disabled, please include any relevan
relevant club pe	my/my child's personal data provided in sections C, D and E to be shared with the rsonnel for the purposes of the delivery of my safe participation in club activity. This shared or processed for any other purpose.
SECTION F: PHO	OTOGRAPHY & VIDEO CONSENT
safety of all club	lers Young Athletes (HBYA) recognises the need to ensure the welfare and members We will not permit photographs, video or other images of club at consent. For children Under 16 consent must be provided by their parent or
are intended. If y	all possible steps to ensure these images are used solely for the purposes they you become aware that these images are being used inappropriately you should Welfare Officer immediately. Lawrie Baker or Annalisa Alexander
□I give permissic purposes.	on for my/my young athlete photograph/Video to be used within the club for display
□I give permissic publications.	on for my/my young athlete photograph/Video to be used within other printed
☐I give permission	on for my/my young athlete photograph/Video to be used on the club's website.
□I give permission pages.	on for my/my young athlete photograph/Video to be used on the club's social media
□I give permiss analysis purpose	ion my/my young athlete photograph/video of me to be used for training or es
Signature:	
Print Name:	
Date:	



SECTION G: CLUB PRIVACY STATEMENT & COMMUNICATION PREFERENCES
Haslemere Borders Young Athletes (HBYA) take the protection of the data that we hold about you as a member seriously and will do everything possible to ensure that data is collected, stored, processed, maintained, cleansed and retained in accordance with current and future UK data protection legislation.
Please read the full privacy notice carefully to see how we will treat the personal information that you provide to us. We will take reasonable care to keep your information secure and to prevent any unauthorised access.
☐ I confirm that I have read and understood the privacy notice and how data will be used and shared
☐ I would like to receive Information via email from the Club about specially selected products and services available from commercial sponsors and partners
In addition to email, I am happy to receive communications via: SMS Spond Spond
SECTION H: TRANSFER SHARING WITH ENGLAND ATHLETICS
When you become a member of or renew your membership with HBYA you can also choose to be registered as a member of England Athletics (you will have to register with England Athletics if you ever compete for the club in competition Under UKA Rules). If you tick the box below, we will provide England Athletics with your personal data which they will use to enable access to an online portal for you (called MyAthletics). England Athletics will contact you to invite you to sign into and update your MyAthletics portal (which, amongst other things, allows you to set and amend your privacy settings). If you have any questions about the continuing privacy of your personal data when it is shared with England Athletics, please contact dataprotection@englandathletics.org

If you do not tick the box below and then decide to compete for the club, we will need to register you with England Athletics and we will inform you at that time.

☐ I want to join England Athletics ☐I don't want to join England Athletics at this time



Date:

HASLEMERE BORDER Y.A

SECTION I: VOLUNT	EERING			
support club activity. Vinterested in voluntee	unteers, and we are always looking for new people to come and We provide training and support for all new volunteers. If you are ring at our club, please let us know by completing the information eer coordinator will be in touch about next steps.			
Are you interested in volunteering at our club $\ \square$ Yes $\ \square$ No				
Does any of the role i	nterest you? (edit as required)			
☐ Coaching Lirf or Cir☐ Officiating☐ Team Manager☐ Events & Competiti What do you do for a Any skills you wish to	☐ General helper ☐ Marketing & Communications ion ☐ Digital ☐ Unsure but want to do something day job?			
SECTION J: DECLA	RATION			
☐ The club's const☐ The Code of Con For parents/Care ☐ I confirm that me bullying policy.	nduct for parents/carers, senior athletes or children and young people			
Signature:				
Print Name:				

