



## 2009/10 Junior Cricket Registration

<b>Players Name:</b>		<b>DOB:</b>
<b>Address:</b>		<b>Age at 1/9/09:</b>
		<b>Sex:</b>
<b>Home phone:</b>	<b>Mobile:</b>	<b>School:</b>
<b>Parents/Guardians:</b>		
<b>Email Address:</b>		
<b>Emergency Contact:</b>		

**Previous Cricket Experience** (please tick one)

Under 11B     
  Under 11A     
  Milo     
  No Experience

**Preferred team/group**

Age:       Under 11B       Under 11A       Under 13  
 Day:       Friday       Saturday (note u11B not on Saturday)

We will try to place friendship groups in the same team. However, this is not always possible due to differing playing abilities and the need to even out numbers in each team. Hence we can not always guarantee your selection

**Clothing**

All players in 2009/10 will receive a club playing shirt and cap. Please indicate your preferred shirt size: \_\_\_\_\_

**Equipment**

CYMS Cricket Club provides a team kit with bats, pads, helmets, gloves etc for games and training. Each child needs to have their own box and white cricket pants.

**Parent/Guardian Involvement**

As a club of volunteers, your child's team needs your help and assistance during the season to develop the team and provide appropriate support. Each team needs a manager and coach for the season and an umpire and scorers at each game. Please indicate how you can assist. Please note that a roster will be distributed once teams are selected.

Coach     
  Manager     
  Umpire     
  Training     
  Games

**Parent/Guardian Consent**

I give consent for my child to participate in under \_\_\_\_ (insert age) cricket for Williamstown CYMS CC during the 2009/10 season. I authorise the Club to seek medical attention if I can not be contacted and treatment is deemed necessary. My child and I are aware that participating in the game of cricket is potentially hazardous. I assume all risks associated with participating, including but not limited to falls, contact with other participants, the effects of weather and other reasonable risk conditions associated with the sport. All such risks to my child are known and understood by myself and child. I have read and understood this consent form and agree to its conditions on behalf of my child.

Signed: \_\_\_\_\_

Note: Please tick this box if you **do not** wish photos of your child to appear in any Club publications or on the Club's website.

For club use only:  
 Payment received: Yes/No  
 Receipt issued: Yes/No  
 Registration Number: