



2010/11 Junior Cricket Registration

Player Name:		DOB:
Address:		Age at 1/9/10:
		Sex:
Home phone:	Mobile:	School:
Parents/Guardians:		
Email Address:		
Emergency Contact:		

Previous Cricket Experience (please tick one)

Under 15 Under 13 Under 11 Milo No Experience

Preferred team/group

Age: Under 11A Under 11B Under 13 Under 15

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

New players will receive a club playing shirt and cap. Returning players will receive training shorts and t-shirt. 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 2010/11 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: