



Women Membership Form Competitive teams 2017/18

Personal Details (Please write clearly)

First Name _____ **Surname** _____
Address _____ **Postcode** _____
D.O.B. (dd/mm/yyyy) _____ **Nationality** _____
E-mail _____ **Contact number** _____
Sex Female Male **Have you ever played abroad?** Yes No
Identification document to register _____ **Identification document number** _____

White (British, Irish, Gypsy or Irish Traveller, Other White)	<input type="checkbox"/>
Mixed/Multiple ethnic group (White & Black Caribbean, White & Black African, White & Asian, Other Mixed)	<input type="checkbox"/>
Asian/Asian British (Indian, Pakistani, Bangladeshi, Chinese, Other Asian)	<input type="checkbox"/>
Black/African/Caribbean/Black British (African, Caribbean, Other Black)	<input type="checkbox"/>
Other ethnic group (Arab, Any other ethnic group)	<input type="checkbox"/>

Medical Consent & Emergency Contact Details

I confirm that I am in good health and I consider that I am capable of taking part in the handball activities of the Islington Handball Club (hereafter referred to as “the Club”). I have completed the medical details below and consent that in the event of any illness/ accident or emergency, any necessary treatment can be administered to me, which may include the use of anaesthetics. I also understand that while Coaches will take any precaution to ensure that accidents do not occur, they cannot necessarily be held responsible for any loss, damage or injury suffered from me. I am also aware that it is my responsibility to have my own individual Accident Insurance.

Emergency Contact First Name _____ **Surname** _____
E-mail _____ **Contact number** _____
Name of GP _____ **GP Contact details** _____
Do you have a disability or impairment Yes No If yes, please specify _____
Do you take any medication for asthma Yes No
Any other relevant information (medication, diet, behaviours, etc.) _____

Photo and Video Consent

I acknowledge that certain activities may involve me being photographed or filmed, achieved for promotional use, and therefore agree to contact the management of the club should I disagree to this activity.

Membership Cost Structure & Fees

The membership is valid for the period from September 2017 to August 2018 and is composed of the below elements.

For any **late season joiners**, Finance will calculate a pro rata fee and payment can be made in one or two instalments. Please see contact details on the next page.

- **Training Module (£180)** covering costs for hall rent, coaches and any necessary practice equipment.
- **EHA License (£20)** to register with England Handball for a license to play with the Club. The license gives you a medical coverage for the league games played with the Club.
- **League Games (£70)** covering costs for sports hall rent, referees, necessary equipment for the whole league.
- **Friendly Games (TBC)** It is not feasible to assess both numbers and costs of friendly matches at the start of the season. Fees may occur and will be communicated to the members prior to each friendly game.

Membership Payment Options & Bank Details

Islington Handball Club Membership		
Options	Total Amount	Tick which applies
Option A: Payment in one instalment by 9 th October 2017	£250.00	<input type="checkbox"/>
Option B: Payment in two instalments - 1st instalment by 9 th October 2017 amount of £135 - 2nd instalment by 31 st January 2018 amount of £135	£270.00	<input type="checkbox"/>
Option C: I am a London Metropolitan University Sports Member or Westminster University Student and benefit from a special agreement*	£90.00	<input type="checkbox"/>

**The Training Module fees are covered as part of the agreement between the Club and the universities. You still need to cover license (20£) and game fees (70£) if you wish to participate at league games. London Metropolitan Students will need to provide a copy of the Sports card and Westminster Students will need to provide a copy of your USWU registration.*

Islington Handball Club – Bank Details	
Bank	Lloyds Bank
Sort Code	30-18-43
Account Number	26275768
Account Name	Islington Handball Club
Reference	<i>Team Name + Player's Name (example: Women Jane Jones)</i>

For any questions please speak to your Team Manager or send an email to finance@islingtonhandball.com and management@islingtonhandball.com.

Date (dd/mm/yyyy) _____

First Name _____

Surname _____

Signature _____



Receiving Federation <input type="text"/> GBR	The receiving federation requests a(n) <input type="checkbox"/> unlimited release <input type="checkbox"/> lending until <input type="text"/> <input type="checkbox"/> lending agreement attached	DATE OF BIRTH Player <input type="text"/> day / month / year
Releasing Federation <input type="text"/>		

player's first name <input type="text"/>	player's surname <input type="text"/>
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<input type="checkbox"/> male <input type="checkbox"/> female	nationality <input type="text"/>	passport ID number <input type="text"/>
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Name of receiving club <input type="text"/>	competition level of new club in 2017/18 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="text"/>
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Player's status in the new club <input type="checkbox"/> professional player <input type="checkbox"/> amateur player <input type="checkbox"/> player with education agreement <input type="checkbox"/> student (student certificate must be attached) beginning of contract: <input type="text"/> end of contract: <input type="text"/>	Player's license for new club requested to be valid from: <input type="text"/>
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Name of releasing club <input type="text"/>	Compensation for Education: <i>professional player / national team</i> Information from the player: 2010/11: <input type="checkbox"/> <input type="checkbox"/> 2011/12: <input type="checkbox"/> <input type="checkbox"/> 2012/13: <input type="checkbox"/> <input type="checkbox"/> 2013/14: <input type="checkbox"/> <input type="checkbox"/> 2014/15: <input type="checkbox"/> <input type="checkbox"/> 2015/16: <input type="checkbox"/> <input type="checkbox"/> 2016/17: <input type="checkbox"/> <input type="checkbox"/>
Player's status in the releasing club <input type="checkbox"/> professional player <input type="checkbox"/> amateur player <input type="checkbox"/> player with education agreement <input type="checkbox"/> student beginning of contract: <input type="text"/> → end of contract: <input type="text"/>	

last match with releasing club:

EC participation in 17/18: yes no

↳ Competition + competition phase

Signature and stamp of the requesting Federation: _____ Date of the request: _____