

# Membership Form

## Tunbridge Wells Borderers Cricket Club

Home Ground: [St Marks Playing Field, Frant Road Tunbridge Wells, Kent TN2 5LS](#)



We are very pleased to **welcome you** to Tunbridge Wells Borderers Cricket Club

This form should be completed for all senior members aged 18 or over and returned to the Secretary, Chairman or Team Captain. (Under 18 and Junior Members please complete the Under 18 & Junior Membership/Consent form available the membership secretary)

The membership fees are shown below,

Full Membership £75  
 Social/non-playing members £30  
 Full Time student or unemployed £50

Membership fees are due by 31<sup>st</sup> May 2019

Method of payment **Cheques** made payable to "TWBCC" and sent with your membership form  
**On Line Transfers** Lloyds Bank, Tunbridge Wells. Account Name: TWBCC. Account No.: 01441984 Sort Code: 30-98-77

In addition, a match fee of £10 per full member & £5 per student / Junior / unemployed member is payable in every match played

### MEMBER CONTACT INFORMATION

<b>Title</b>	<b>Mr /Mrs /Ms /Miss (Please circle)</b>	<b>Date Of Birth</b>	
<b>Full Name</b>			
<b>House Name or Number</b>		<b>E-Mail</b>	
<b>Street</b>		<b>Home Phone</b>	
<b>Village</b>		<b>Work Phone</b>	
<b>Town</b>		<b>Mobile Phone</b>	
<b>County</b>			
<b>Post Code</b>		<b>Membership Type</b>	

The information that you are giving us will only be used by Tunbridge Wells Borderers Cricket Club. You will receive e-mails & texts relating to the running of the club. It will not be sold to any third party. If you are a player, you will have some of your details & playing statistics stored on the play cricket web site as required by the Sussex Cricket League/ECB. Please read our Data Protection & Privacy policy that is available by request from the secretary & on the club website, [www.TWBCC.org.uk](http://www.TWBCC.org.uk).

Please tick the relevant boxes concerning the acceptance of the above and that you have read & accept our data protection policy. Yes  No

**Playing Speciality** Please circle all that apply **Batsman Bowler Fast Bowler Medium Bowler slow Wicketkeeper**

**MEDICAL INFORMATION** Please detail below any important medical information that your coaches and fellow players should be aware of (e.g. epilepsy, asthma, diabetes, allergies, etc.). If none, please enter NONE below:

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### EMERGENCY CONTACT DETAILS

Please insert the information below to indicate the person(s) who should be contacted in the case of an incident or accident:

Contact Name(s): ..... Relationship.....

Emergency Contact Telephone Numbers Mobile..... Home.....

I apply to join Tunbridge Wells Borderers Cricket Club & by signing this form I agree to this information being held & used as you have indicated above.

Signature..... Name.....Date.....