



WOKING BLACKHAWKS BASKETBALL CLUB

www.blackhawks.co.uk



Senior Member Registration Form - Season 2020-21

Welcome to the Woking Blackhawks. Please read the below information regarding your registration.

All members of the Club need to register with our National Governing Body, Basketball England, which allows participation in all competitions run under their control. Your Team Manager will assist you in this process.

COVID: The playing season *normally* runs from 1 September to 31 August. In accordance with Basketball England's [Return to Play](#) guidance document, basketball activities will recommence as and when the Senior Committee considers appropriate and venues become available. All members choosing to participate in Club activities do so at their own risk and will be required to comply with Basketball England's Return to Play guidance and the Club's own return to play [policy](#).

Payment: Club membership fees are payable by a monthly subscription into the Club Senior Section bank account. Monthly payments are due by the 7th of each month and begin when you first attend training sessions. Fees cover all training and match costs. A separate deposit payment of £20 is payable for kit hire (if required). This deposit will be returned to you when the kit is returned to your Team Manager in the same condition. Membership fees are payable regardless of attendance. Any unsanctioned break in payments will result in a suspension of Club membership.

Data Protection: Please refer to the Club's Privacy Notice on the Club website for details of how the Club uses the personal data provided to us on this form.

Code of Conduct: Please refer to the Club's Code of Conduct on the Club website for details of how those involved with the Club are expected to behave.

The Club is a not-for-profit organisation. All funds received are reinvested in the club for player equipment, court hire, league and BE registration and Club development. Shopping online? Use www.easyfundraising.org.uk/causes/wokingblackhawks and raise funds for the Club.

Please keep up to date with all Club news, match and training schedules at: www.blackhawks.co.uk, on facebook or instagam.

Thank you for joining us. If you have any questions please do not hesitate to ask your Team Manager, Coach or any Senior Committee Member.

Dan North

Head of Senior Basketball

Payment Details

Players Name: _____

Squad	Monthly Payments
Men – Wessex	£ 36.00
Ladies – Wessex	£ 32.00

Squad Code: **WB1** (Woking Blackhawks 1 - Men) **WB2** (Woking Blackhawks 2 - Men) **WB3** (Woking Blackhawks 3 - Men)
SL (Woking Blackhawks Ladies) (please circle as appropriate)

Monthly payments of £___.__ (payable by the 7th of each month, starting September 2020)

Please set up a standing order payment to Woking Blackhawks using the details below.

Account Name: **Woking Blackhawk Basketball Club Senior**

Bank: **HSBC** Sort Code: **40-35-45** Account Number: **81625624**

Please use Reference '**Squad Code**' + **your surname** - e.g. **wb1 Bloggs**

Potential Sponsorship Contacts

The Club is continually looking for additional funding opportunities; If you know of a Company and/or contact who may be interested in sponsoring the Club please include their details below.

Company _____ Web Site _____

Contact Name _____ Email _____ Tel No _____

Other Info _____





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Senior Member Registration, Medical and Consent Form - Season 2020-21

To be Completed for all members in BLOCK LETTERS

First Name		Last Name		Gender M/F
Date of Birth		Squad Code <small>(see list below right)</small>	Ethnic Origin Code <small>(see list below)</small>	
Address House Number or Name		Ethnic Origin Key W British White WI Irish White WO Other White MBC Mixed white & black Caribbean MBA Mixed white & black African MA Mixed White & Asian MO Mixed other I Indian P Pakistani B Bangladeshi C Chinese AO Other Asian BC Black Caribbean BA Black African OB Black other OT other ethnic group	Squad Codes SL – Ladies WB1 WB2 WB3	
Street			<i>Gender and Ethnic Origin are required by Basketball England Registration and are also used in grant applications</i>	
Town				
County				
Post Code <small>(must be provided)</small>				
Home Telephone				
Players Mobile				
Players Email				
Emergency Contacts		Name		Telephone No
First Contact				
Second Contact				
Medical Details -Please inform us of any conditions and/or self-administered medication that may affect you participation in rigorous training and playing a physical game of basketball. Please use separate sheet if necessary.				
Doctor's Name:		Tel No		

Basketball Qualifications – please tick adjacent any Basketball qualifications the member has gained.	Table Official Level 1		Table Official Level 2	
	Referee Level 1		Referee Level 2	
	Coach Level 1		Coach Level 2	
	Other			

Consent:

- I have read the accompanying letter regarding COVID-19; I agree to take part in the activities of Woking Blackhawks Basketball Club and acknowledge that I undertake basketball and associated activities at my own risk and responsibility.
- I agree to abide by the rules and codes of conduct of the Club and Basketball England.
- I give my consent for the Club to hold the medical details provided on this form.
- I give my consent for the administration of basic first aid treatment by coaches.
- I give my consent to be taken to hospital in the event of an emergency.
- The Club uses email as one of its main communication medium. I give my consent for the email addresses provided to be used for Club communication.

Payment Terms

- Registration fees count as first payment. Subsequent payments to be paid by 7th of month following registration.
- The club will need a month's notice before a standing order can be cancelled.
- Membership fees are payable regardless of attendance.** Special cases should be brought to the squad Coach and then to the Head of the Seniors Programme, whose decision will be final.
- Non-payment of a monthly amount will result in the player's membership being liable to cancellation with immediate effect.

I declare that the above information is correct.

Signed (by player): Date:





Dear Player or Parent/Guardian

In accordance with Basketball England and Government guidance, the Covid-19 pandemic suspended all Basketball activities with the Club.

It is intended that the Club will resume Basketball activities when the risk levels from the pandemic have reduced in accordance with Basketball England and Government Guidance. The current version of the Return to Play Guidance (**RTPG**) document can be seen at <https://www.basketballengland.co.uk/news/basketball-england-launch-return-to-play-guidance/>

From the 4th August, 'Response Level 2' was reached where indoor training and competition could be resumed.

To minimise the risks from Covid-19 when Basketball activities resume the Club will undertake to implement the guidance of the RTPG document.

In particular the Club has, or will: -

- Appoint a Club Covid officer who can be contacted at covid@blackhawks.co.uk
- Distribute to all senior members and parents/guardians of Junior members this 'Return to Play' letter that sets out the actions required to allow play to resume safely
- Liaise with venues to advise them of the Club's procedures and to be made aware of any venue specific requirements
- Implement hygiene measures
- Implement screening requirements, retaining records as appropriate in accordance with the General Data Protection Regulations
- If the Club is informed that a member develops Covid-19, members who have been in contact with the affected person will be informed and Basketball activities will be suspended as appropriate
- Monitor, review and amend its policy on returning to Basketball activities.

The Club asks players or parents/guardians to: -

- Read the attached 'Club Members Covid-19 risk information sheet' to understand to risks associated with Covid-19
- Consider if you or anybody you have been in contact with exhibit any Covid-19 related symptoms
- Arrive at any training or playing venue ready to play in kit with full water bottles - changing rooms and water fountains will not be available
- Undertake screening outside the venue before entering, respecting any instruction from the person undertaking the screening
- While in the venue undertake hygiene requirements as instructed by the coach or team manager
- At the end of the session ensure you have collected and disposed of your rubbish and wiped down all equipment with alcohol-based wipes
- Advise the Club if members subsequently develop Covid-19 or any symptoms.

Thank you for joining us. If you have any questions please do not hesitate to ask your Team Manager, Coach or any Senior Committee Member.

Dan North

Head of Senior Basketball



Club Members COVID-19 Risk Information

PERSONAL AND HOUSEHOLD RISK INFORMATION

This information sheet aims to inform you of those who are most at risk should they contract Covid-19. You should identify whether you or a member of your household is at higher risk. If you are, please discuss the risk of returning to basketball with your GP and your Club Covid Officer to make an informed decision as to whether returning to group basketball is appropriate and safe for you and your family. While research around risk is ongoing, we simply hope to inform you so you can make the right decision for you and your household.

If any of the following statements apply to you or a household member, then this means that either you or a household members risk is increased. If it applies to a household member then you need to discuss it with your GP and the household member to make a decision on if a return to basketball is appropriate in a group setting, as it is possible to pass on the virus to a more vulnerable individual.

Should any of the above statements apply to you or your household, please notify your COVID officer and speak to your GP to allow you to make an informed decision that protects you and your household.

Statements apply to YOU or your HOUSEHOLD
Had a solid organ transplant
Undergoing treatment currently or in last 6 months for any cancer
Currently taking or in the last 6 months have taken immunosuppressant medication
Have a respiratory condition including all cystic fibrosis, severe asthma and severe chronic obstructive pulmonary (COPD)
Have any rare diseases or inborn errors of metabolism that significantly increase the risk of infections (such as Severe Combined Immunodeficiency (SCID), homozygous sickle cell)
Pregnant
Aged 70 or older
<i>Have one or more of the underlying health conditions listed below:</i>
<ul style="list-style-type: none">• Chronic (long-term) mild to moderate respiratory diseases, such as asthma, chronic obstructive pulmonary disease (COPD), emphysema or bronchitis
<ul style="list-style-type: none">• Chronic heart disease, such as heart failure
<ul style="list-style-type: none">• Chronic kidney disease
<ul style="list-style-type: none">• Chronic liver disease, such as hepatitis
<ul style="list-style-type: none">• Chronic neurological conditions, such as Parkinson’s disease, motor neurone disease, multiple sclerosis (MS), or cerebral palsy
<ul style="list-style-type: none">• Diabetes
<ul style="list-style-type: none">• A weakened immune system as the result of conditions such as HIV and AIDS, or medicines such as steroid tablets
<ul style="list-style-type: none">• Being seriously overweight (a body mass index (BMI) of 40 or above)
Are you providing caring responsibilities for anyone meeting any of the above criteria?