

# JUNIOR PROGRAMME START UP FORM

JUNIOR - Please fill out all sections	
Junior Full Name	
Junior DOB	
Parent/Guardian email address	
Emergency contact name & number*	
Allergies/ Medical Conditions	

\* We will use the contact number you have supplied with Firetext, a mobile messaging service which we use to contact you with regards to your child's Junior Programme. For example; if a class is cancelled. If you are happy to use this service please tick the box below.

'Yes I am happy for St George's Hill Lawn Tennis Club to use the above contact number alongside Firetext to contact me regarding my child's class'

Signature: \_\_\_\_\_

IMPORTANT INFORMATION	
"By signing below: ' I understand my responsibility to collect or arrange for my child to be picked up at the end of the advertised time of the session."	
"By signing below: I agree that first aid treatment can be administered to the above junior incase of illness, injury or emergency."	
Parent/Guardian signature	Date

### Information:

If your emergency contact number, email address or juniors' allergies/medical conditions change, please ensure you inform Bekki Hopkins-Holder [bekkih@stghlhc.co.uk](mailto:bekkih@stghlhc.co.uk). Once you have completed this initial start up form you may book your junior onto Tennis, Squash or Swimming sessions either in person at Reception or over the phone: 01932 843541

## Consent for use of photographs for St George's Hill Lawn Tennis Club social media.

### Your details (if U18 must be the parent/carer)

Name:		
Address:		
Contact details:	Phone: Mobile:	Email:

### Details of the child / adult (if different)

Name:		
Date of birth:		
Address (if different from the parent/carer):		
Contact details (if different from the parent/carer):	Phone: Mobile:	Email:

### Activities

<b>I give permission for the child to:</b>		
Be involved in photography and/or filming to be included on the Club's website and Social media pages (Facebook, Twitter, Instagram). Names would not be included.	Yes	No