Northallerton Tennis Club

Youth Membership Supplementary Application Form (13-17 year olds)

**From 1st April 2021**

Parents/carers please complete this form and return it with membership application details to: [tennis.northallerton@gmail.com](mailto:tennis.northallerton@gmail.com) marked for the attention of Jackie Hay

OR post to:

**Treasurer Jackie Hay, 2 Byram Court, Northallerton, DL6 1RU**

Parent/Guardian/Carer details

|  |  |
| --- | --- |
| Name: | Name: |
| Address: | Address: |
| Phone:  Mobile:  Email:  Emergency contact details if different from above: | Phone:  Mobile:  Email:  Emergency contact details if different from above: |

Details of Youth

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| --- |
| Name:  Date of Birth: |
| Does the young person have any medical/health/access/dietary or additional needs? Yes/No  If yes please give details below including any medication.  I give permission for the young person to be involved in photography and/or filming Yes/No |

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| Confirmation of permission for a youth (13-17 year old) to use the tennis courts without adult supervision and to take part in Tennis Club activities with other members and to ensure the youth adheres to the Government's social distancing guidelines (staying at least 2m away from others), and practises public health advice for hygiene.  Name of Parent/Carer:  Signature: Date: |