



NOWRA CROQUET CLUB Inc
**JUNIOR MEMBERSHIP and ANNUAL
RENEWAL APPLICATION**

*** For renewal, please complete the first two pages*

First Name

Last Name

Of _____
Address _____

Wish to become /renew as a junior member of Nowra Croquet Club Inc.

Further Information:

Occupation: _____

Date of Birth: _____

Mobile: _____

Email: _____

Declaration:

In the event of my admission as a junior member, I agree to be bound by the rules of the Club and Croquet NSW.

I am aware of and will abide to the Club's Safe Child Policy (2023).

As a junior member, if I have any concerns with my treatment at the Club or by a member, I will advise a member of the committee and/or my parents.

I understand that if my parents/guardian or a supervising club member* is not present, I can only play croquet if there are more than two adult members present.

Signature: _____ Date: _____

* A supervising adult club member has a verified WWCC

PARENT/GUARDIAN CONSENT - PERSONS UNDER 18 YEARS OLD

I, _____

Of _____

Am the parent/guardian of _____

I consent to his/her becoming/renewing as a member of Nowra Croquet Club.

I agree to providing emergency contact numbers (min of two) and acknowledge that I am responsible for the drop off and pick up of my child.

I understand where a NCC member provides transport to and from home for my child, that adult club member will have a verified WWCC.

I understand that a supervising adult needs to be present when my child plays but in the event that I or a supervising adult is not present, I agree to my child playing croquet with at least two adult members of Nowra Croquet Club.

I understand that the contact details are required by Croquet NSW and the NSW Government under the Associations Incorporation Regulation 2022. I understand that any electronic or paper-based communication with my child will involve me.

CNSW and Nowra Croquet Club will register “Privacy” for contact details. I agree that only my child’s name can be shared with club members. Contact details to be limited to the Club Executive.

Parent/Guardian Email: _____

Signature of Parent/Guardian: _____

Date: _____

Emergency Contact Phone Numbers: (Min of 2)

Name *Relation* *Phone No.*

Name *Relation* *Phone No.*

**** Parent/Guardian to sign the Photography & Video Permission Form if he/she agrees to have the child’s image displayed.**

Nomination and Secunder from a Nowra Croquet Club full member(s):

I _____
Nominator's Name

Nominate the applicant, who is personally known to me, for membership of the Nowra Croquet Club. Inc.

Signature of Nominator: _____

Date: _____

Secunder's Name

Second the Nomination of the applicant for membership of the Nowra Croquet Club. Inc.

Signature of Secunder: _____

Date: _____

* Date of birth is requested by Croquet New South Wales and can be useful when applying for grants.

* *A copy of the Nowra Croquet Club's Safe Child Policy will be provided with this application. (Can be electronic)*

* A junior member must RENEW this application every year when the annual fees are due.

* Parent/ Guardian signatures are required each Club year

Secretary Use Only

Dates:	<i>Application Accepted</i>	<i>Letter Sent</i>	<i>Paid</i>
<i>Entered M'ship List & Register</i>	<i>Entered Email Contact</i>	<i>Registered CNSW</i>	<i>CNSW ID entered/sent</i>

*** *Further information available on the Nowra Website: nowracroquetclub.com.au*

Governance - Policies

Our Club - Member Information 2023-2024 ~ Member/Junior Membership Forms

The Game ~ Top 10 Benefits of Playing Croquet.

Email: nowracroquet@gmail.com ~

Club Address: 127 Cambewarra Road, Bomaderry Sporting Complex.