

www.mknetters.co.uk

Dear Parents/Guardian,

On behalf of MK Netters Junior Netball Club I would like to welcome your child to the club and provide you with some information about our activities. The club provides opportunities for young people between the ages of seven and sixteen years to receive netball coaching in a training session and to attend competitions whenever possible. All coaching is by qualified, or training to be qualified coaches, who have been screened for their suitability for working with young people.

**Training Sessions**

Training sessions are weekly but timings and venues vary for age groups dependent on coaching staff and venue availability and details will be posted on the club website. Any closure dates (such as use of school premises for exams etc) will be notified in advance wherever possible.

The club work closely with MK Dons Set Netball club and provide as many local girls as possible access to as high a standard of netball that we can. The regional teams for both MK Netters and MK Dons Set train separately to the MK Netters club training, to enable girls to progress and enjoy netball at their appropriate level.

**Payment Details**

The club has a small annual membership fee of £20.00 / player. The membership fee should be paid as soon as possible please preferably by 1st September. Membership subs contribute to the ongoing costs of running the club

Subs are £19/month, as of season 2021/22 the monthly fee for a sibling is £16.

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**The subs are payable by standing order on 1st of each month, please use the following details for online banking.**

**Sort Code** 60-14-55 **Account Number** 61078085 **account holder:** MK Netters Netball Club

**Ref:** Childs Surname / Group

If you wish to discuss your payments please do not hesitate to speak to your session Coach / Team Manager. It is important to note that the standing order is based on ***12 equal monthly payments*** and payments continue during the school holidays even when there are no training sessions planned.

The club will be operating a strict NO PAY / NO PLAY policy from September as the running costs are so tight, we need to ensure ALL subs are paid on time.

**Travel Arrangements**

Arrangements should be made for your child to travel to and from training sessions and matches unless other arrangements have been made. We would appreciate it if children can ***arrive promptly*** and are ***collected promptly*** at the end of the session. If in an emergency you will be late collecting your child, please ensure the Coach / Team Manager are aware. YOU MUST COLLECT YOUR CHILD FROM THE HALL – DO NOT WAIT IN THE CAR PLEASE

***Please note that the club is not responsible for any child arriving early for a session or after the sessions have ended. The club is also not responsible for any child that is not registered with the club.***

**Personal Details**

We would be grateful if you could complete all the attached club forms as soon as possible. For the safety of your child it is important that the club is informed of any medical condition or allergies that may be relevant should your child fall ill or be involved in an accident while at the club. Please also inform us of any change in your personal details e.g. contact numbers, address as soon as possible.

***Please note we require a contact number for someone who is contactable while your child is attending the club sessions.***

**Support MK Netters**

The club is always looking for people to assist with the running of the club as it eases the workload of other volunteers. If you would like to offer some help to the club in ANY way; coaching, umpiring, team management or committee involvement then speak to one of the club officials.

The club is also looking for club/squad sponsorship so if you can help or know a company/person that can help us please speak to a committee member, a sponsorship brochure is available upon request explaining requirements and running costs of the club.

If you would like to talk to someone at the club about any of the information included in this letter or your child’s involvement with the club, please do not hesitate to use the ‘contact us’ tab at [www.mknetters.co.uk](http://www.mknetters.co.uk) or speak to one of the club officials on the numbers shown below.

***Please could you and your child take some time to read the attached club handbook and both of you sign and return the slip attached with your annual membership. Remember please that standing order forms go to your bank /building society – not the club***

**GDPR –** We would like to confirm that we use your information within the club, by admin, coaches and team managers and to register your child with England Netball and competition organisers. We do not sell or share your details with 3rd parties not related to providing your daughter with netball opportunities.

Thank you and welcome to the club

Regards

**Louise Collard**

**Chairperson**

**Tel.: 07800 573722**



**Declaration**

*I acknowledge that my details will be used by the club for internal communication purposes by the coaches, team managers and committee administrators. The information will be used for England affiliation in line with their requirements and also on occasion with some competition organisers where relevant. The club confirms the information held by us will not be distributed for marketing purposes externally and all information held will be in a secure password protected location.*

£20.00 Membership payment made online: DATE: REF:

Monthly £19 subs to be paid by Standing Order (or Internet banking) on the 1st of each month i.e. 1/9/20xx for Sept

In case of a sibling please set up a separate Standing Order for £16 on the 1st of each month

Contact and Medical Information

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| --- |
| ***Medical information:*** If you answer yes, please provide details, use separate sheet if needed. During the season if there are any medical concerns, please keep your coach/TM updated. |
| |  |  |  | | --- | --- | --- | |  | YES | NO | | Does your child have any medical conditions? |  |  | | ***Details:*** | | | | Do they require regular medication? |  |  | | ***Details:*** | | | | Does your child have any neurodevelopment conditions |  |  | | ***Details:*** |  |  | | Please let us know if there are any additional needs that your child has that would help us to support them | | | | ***Details:*** | | | | * I give my consent that if an emergency medical situation arises, the organisation/club may act as loco parentis. If the need arises for administration of first aid and/or other medical treatment which in the opinion of a qualified medical practitioner may be necessary. I also understand that in such circumstances that all reasonable steps are made. | | | |

Emergency Contact (Print) : .....................................................................

Relationship to Child : .....................................................................

Telephone No. : .....................................................................

Signed: ........................................................................

Date: ............................................................................



Registration Form

First Name ........................................ Surname .........................................

Address ................................................................................................

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................................................................................................

Postcode ........................................ Home Tel…….. ..............................

Parent Mobile…………………………………… Child’s Mobile\*\* ...............................

Email Address Parent ..................................................................................

Email Address Child\*\* ....................................................................................

Start Date ........................................

Date Of Birth .................................... Age ........... Male\*\*\*/Female

School .................................................. School Year ..............................

Have you any Netball experience Yes/No

Parent/Guardians Names (Print) ...............................................................

Parent/Guardians Signature .....................................................................

We would like, on occasions, to have photographs taken of our members either at training sessions, at presentation evenings, at fundraising events or while representing the club in full club kit. These photographs would be used for publicising the club, our club website or the club scrapbook. If at any time we have publicity photographs taken we will try to keep you informed before the agreed date.

Can you please sign the below permissions slip, allowing us to take these photographs and return as soon as possible.

I/We consent to my/our child having her/his photograph taken while representing MK Netters Junior Netball Club \*Yes/No

If you have any concerns, please speak to your session coach/committee member.

Signed: .................................................... Parent/Guardian Date: ........................................................

\*Please delete as appropriate

\*\* child phone number and email address are not mandatory and are usually only given for the older girls so that coaches / team managers can contact directly if the need arises. MK Netters do not share this information with anyone outside club

\*\*\* male children are only allowed up to school year 6



Club Contact Details

**Chair Person Louise Collard** **07800 573722**

16 Sharkham Court

Tattenhoe

Milton Keynes

MK4 3BU

Email: louise.collard64@gmail.com

**Head Coach Julie Tucker** **07718 380451**

9 Southbridge

Kents Hill

MK7 6HW

Email: julietucker250768@yahoo.co.uk

**Treasurer:** **Astrid Petrie**  **07941 049044**

Email: [astrid@petrie.co.uk](mailto:astrid@petrie.co.uk)

**Child Protection Liaison Officers:**

**Lucy Simms 07971 829468**

Email: [simms.lucy77@hotmail.co.uk](mailto:simms.lucy77@hotmail.co.uk)



