

# Tilehurst Junior Youth Club

23 The Triangle, Tilehurst, Reading.  
Telephone: 0771 2445 900

## Youth Club Membership Form

2009-2010

Name \_\_\_\_\_

Address \_\_\_\_\_ Post Code \_\_\_\_\_

Home Telephone \_\_\_\_\_ Mobile Telephone \_\_\_\_\_

Date of Birth \_\_\_\_\_ E- Mail \_\_\_\_\_

School \_\_\_\_\_

(PLEASE PRINT E-MAIL ADDRESS CLEARLY)

Ethnic Origin (optional): White / Black / Asian / Other \_\_\_\_\_

(For equal opportunities monitoring purposes)

New Member  Existing Member  Membership No

PARENTS: I would be willing to volunteer on a rota basis on Friday nights Yes  No

### Emergency Contact

**This section MUST be completed** Please give us the details of someone local we can contact to collect your child if we can't contact you. **(It cannot be your own address)**

Name \_\_\_\_\_

Relationship to Child (Uncle, Aunt, Friend etc) \_\_\_\_\_

Address \_\_\_\_\_ Telephone \_\_\_\_\_

### Medical

Please tell us about any medical conditions relating to your child which you feel we need to know about.

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In accepting a place for my child I accept the youth clubs membership policy.  
(This is available on our web site [www.tilehurstjuniorclub.co.uk](http://www.tilehurstjuniorclub.co.uk) or on request)

Signed \_\_\_\_\_ Parent / Guardian.

Date Paid \_\_\_\_\_ Card Issued \_\_\_\_\_

To be completed by staff