



Woodland Lawn Tennis Club

Junior Registration Form

Welcome to Woodland Lawn Tennis Club

In order to provide a safe club for all our junior members, and to keep you up to date with club activities, we would like you to tell us some information about yourself.

Please complete this form and get a parent or guardian to sign it if you are under 16.

Please return along with your membership form to treasurer@woodlandtennis.org.uk

Player details

Name		Date of birth	
BTM no. (if known)		Rating (if known)	

Please provide contact details of a parent/guardian in case of an emergency

Contact numbers	Home	
	Mobile	
	Work	
Email		

Please use the box below to describe any special care needs, dietary requirements, allergies or medical conditions.

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Safeguarding

The club are committed to prioritising the well-being of children at risk and providing a safe and welcoming environment where they are respected and valued. We are alert to the signs of abuse and neglect and follow our procedures to ensure that children at risk receive effective support and protection.

To understand the club policies & procedures relating to Safeguarding, please see the website <https://woodlandtennis.org.uk/about/policies-procedures/>. Alternatively, they are displayed in the clubhouse.

Any concern should be raised with the club Welfare Officer via safeguarding@woodlandtennis.org.uk

If they are unavailable or a safeguarding concern relates to them, the concerns should be referred to the Deputy Welfare Officer or directly to the LTA via <https://safeguardingconcern.lta.org.uk/>

Media Consent—photography and filming

I give permission for me/my child to be involved in any publicity (including photographs/ TV footage) surrounding coaching, club, and competitive activities. For full details of how images may be used please visit www.woodlandtennis.co.uk

Member/parent signature:

Date:

Parent/guardian declaration (essential if member is under 16 years)

By signing and returning this form I agree to my child taking part in the general activities of the club. We both agree to abide by the club policies and procedures (available to view on the club website). To my knowledge, he/she has no special care needs, dietary requirements, allergies or medical conditions that could affect his/her safety at the club, other than those declared on this form. I understand that in the event of an injury, illness or other medical need, all reasonable steps will be taken to contact me, and to deal with the situation appropriately. I understand that I must inform the club of any changes to the information provided on this form.

Signed.....

Name.....

Date.....