

**CAUSEWAY TENNIS & BOWLS CLUB**  
**JUNIOR MEMBERSHIP APPLICATION FORM**

FOB No: \_\_\_\_\_

Membership year runs from 1 April to 31 March

Contact: Causeway Tennis & Bowls Club: Walton Park, Abbeyside, Dungarvan, Co Waterford, X35 XT38

E-mail: [causewaytennisclub@gmail.com](mailto:causewaytennisclub@gmail.com)

Tel: 058 44210

W: [www.causewaytennisclub.ie](http://www.causewaytennisclub.ie)

**Member/s:**

Junior Member (1) Name: \_\_\_\_\_

Male / Female            DOB: \_\_\_\_\_

Junior Member (2) Name: \_\_\_\_\_

Male / Female            DOB: \_\_\_\_\_

Junior Member (3) Name: \_\_\_\_\_

Male / Female            DOB: \_\_\_\_\_

**Parental/Guardian Consent:**

In the event of illness, having parental responsibility, I give permission for medical treatment to be administered where considered necessary by a nominated first aider, or by suitably qualified medical practitioners. If I cannot be contacted and my child needs emergency hospital treatment, I authorise a qualified medical practitioner to provide emergency treatment or medication.

I understand that photographs will be taken during or at sport related events and may be used in the promotion of tennis, that they will be stored safely and used only for the agreed purposes. That only authorised persons will take such photographs. Further information available on request.

**Note:**

Members play Tennis at their own risk. The Club does NOT CARRY PERSONAL ACCIDENT INSURANCE for members injured whilst playing Tennis. It is the responsibility of each member to arrange their own Accident Insurance should they require it.

In line with Tennis Ireland Child Protection and Good Practice Guidelines, Causeway Tennis & Bowls Club requires all parents/guardians to confirm that they have read/will read the Code of Ethics and Good Practice for Children's Sport in Ireland.

**Refer to:** [http://www.sportireland.ie/Participation/Code\\_of\\_Ethics/Code\\_of\\_Ethics\\_Manual/](http://www.sportireland.ie/Participation/Code_of_Ethics/Code_of_Ethics_Manual/)

Signature (Parent / Guardian): \_\_\_\_\_

Date: \_\_\_\_\_

**OFFICE USE ONLY:**      Payment \_\_\_\_\_ DB \_\_\_\_\_      Fob \_\_\_\_\_      Skedda \_\_\_\_\_      Bulk Text \_\_\_\_\_      Email \_\_\_\_\_



Parent / Guardian Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

Mobile (Parent 1 / Guardian 1): \_\_\_\_\_

E-mail (Parent 1 / Guardian 1): \_\_\_\_\_

**If applicable:**

Mobile (Parent 2 / Guardian 2): \_\_\_\_\_

E-mail (Parent 2 / Guardian 2): \_\_\_\_\_

Medical History Information (details of any known allergies, conditions, medications):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Membership Rate = €20 plus TI €8 = €28 per junior (01/09/2021 – 31/03/2022)

Membership Rate = €42 plus TI €8 = €50 per junior (01/04/2022 – 31/03/2023)  
(2022-2023)

FOB (if required) = €10

**Methods of Payment:**

1. EFT (Electronic Funds Transfer) into bank account

AIB – Dungarvan

Causeway Tennis and Bowls Club

Account No: 01805048

BIC: AIBKIE2D

IBAN: IE70 AIBK 9340 7001 8050 48

**PLEASE use your name as reference for us to allocate your payment to your membership.**

