

# BADMINTON ENGLAND MEMBER REGISTRATION FORM

**NEW/ADDITIONS**

CLUB NAME...Horsham Arun ..... CLUB CODE ..... AFFILIATED COUNTY ..... MEMBERSHIP No.....  
(if known / if applicable)

**MEMBER DETAILS:** Please write clearly in **BLOCK CAPITALS**

<b>Title</b>		<b>Forename</b>		<b>Surname</b>	
<b>Address</b>					
<b>Town/City</b>		<b>Post code:</b>			
<b>Contact telephone no:</b>				<b>Mobile telephone no:</b>	
<b>Email address:</b>					
<b>Date of birth:</b>		<b>Gender</b>	<b>M / F</b> (please circle)		

**ETHNICITY:** Members are requested to tick the relevant boxes below to assist BADMINTON England in monitoring its Equal Opportunities Policy. BADMINTON England respects the rights of its members not to disclose information relating to ethnic origin or disability, so completion of these sections is not compulsory. However this information will be enormously helpful to maintain a profile of our membership.

Asian or Asian British – Indian	Black or Black British – Caribbean	Chinese	Mixed – White and Black African	White – British
Asian or Asian British – Pakistani	Black or Black British – African	Other Ethnic Group	Mixed – White and Asian	White – Irish
Asian or Asian British – Bangladeshi	Black or Black British – Other	State which . . .	Mixed – White and Black Caribbean	White – other
Asian or Asian British – Other	State which . . .		Any other Mixed	
State which . . .			State which . . .	Prefer not to say

**DISABILITY:**

Do you have long-term illness or health problems that restricts the sorts of activity you take part in <b>Yes / No</b> (please circle)
Do you have a disability that restricts the sorts of activity you can take part in? <b>Yes / No</b> (please circle)

**HOW OFTEN DO YOU PLAY BADMINTON?** Tick the box

Not in the previous 12 months	Once in the previous 12 months	On average, once a month in the previous 12 months	On average, once a week in the previous 12 months	On average, twice a week in the previous 12 months.	On average, 3 or more times a week in the previous 12 months.
If never, are you involved in badminton in another capacity? Coach / Umpire / Teacher / Volunteer (specify) / Other (specify) Please delete as appropriate.					

**PLEASE TURN OVER TO COMPLETE THE FORM**

Your club secretary will be notified of your BADMINTON England membership number once BADMINTON England has processed this application. Please keep a record of your membership number, as it will be required for all correspondence, match entry forms, and in the event of an insurance claim. Please return this form to your club secretary.

How were you first introduced to badminton? **School / college or uni / through a club / through a friend** (please delete as appropriate)

Are you a member of any other badminton clubs? **Yes / No**

If yes, please list other clubs and indicate clearly through which club your BADMINTON England fees are being paid i.e. XYZ badminton club

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Are you paying your BADMINTON England fee through the Coaching Register? **Yes / No**

Do you wish to receive "Badminton" magazine at the given address? **Yes / No**

Would you like to receive other correspondence at the given address? **Yes / No**

Would you be interested in receiving relevant information via email? **Yes / No**

Are you an official / volunteer at either of the following (delete as necessary) **Club / County (ie club secretary, team captain, on committee)**



### **Information about You – Data Protection**

1. We, BADMINTON England, all our subsidiaries, associates and affiliated companies and organisations (including without limitation all badminton clubs and the 41 county associations) (our "Affiliates", "we" or "us") will treat your personal information as private and confidential (even when you are no longer a member). Nothing about your relationship with us or your name and address will be disclosed to anyone other than in accordance with the terms set out below, or:
  - a. where we (or any third party acting on our behalf) are legally compelled to do so; or
  - b. where there is a duty to the public to disclose; or
  - c. where our interests require disclosure; or
  - d. where disclosure is made at your request or with your consent.
2. From time to time BADMINTON England and its Affiliates may share or disclose information about you between themselves and/or relevant third parties in connection with any or all of the following:
  - a. better serving you as a member of BADMINTON England or our Affiliates;
  - b. better serving BADMINTON England's or our Affiliates other members;
  - c. establishing or maintaining our membership;
  - d. providing or administering activities and/or facilities for individuals who are either members of BADMINTON England or its Affiliates or have regular contact with us; and
  - e. advertising or marketing our club(s), aims, activities, facilities, goods or services and promoting public relations so far as they relate to our club(s), aims, activities, facilities or those goods or services
3. Members of BADMINTON England are generally provided with public liability insurance and you hereby consent to our disclosing information about you to any third party in that connection where we have a reasonable requirement to make such disclosure, whether, without limitation, such disclosure is in relation to our seeking, obtaining or maintaining such insurance, or the making or processing or assisting to make or process any claim in respect of such insurance.
4. If there is any documentation which you receive from us which you no longer wish to receive please notify in writing BADMINTON England or the relevant Affiliate.
5. Under data protection legislation, you can ask in writing for a copy of certain personal records we hold about you. We may make a charge for this service.

I have read and understood the BADMINTON England Child Protection Policy and Procedures and the Code of Ethics and Conduct ("Code") and as such agree to fully recognise and adhere to the principles and responsibilities embodied in both of these documents.

**Information about you – by signing this form you are confirming that you have read and accepted the terms set out**

**Date:**..... **Member Signature:** .....