

TANDRIDGE CANOE & KAYAK CLUB – www.tckc.org.uk
Tandridge Canoe Polo League
TEAM REGISTRATION FORM

Thank you for being Team Manager. Please submit this form to Graham Copeman, graham.copeman@gmail.com.

TEAM NAME: TEAM MANAGER'S NAME.....

Team Manager's Tel No: Mob..... Email

Team Manager's Address:

TEAM MEMBER DETAILS:

EMERGENCY CONTACT DETAILS:

Name	Age	Date of Birth	Difficulty / medical condition
1			
2			
3			
4			
5			
6			

Adult contact email address (write very clearly)	Adult Contact 1 Tel No	Adult Contact 2 Tel no

The undersigned confirms that:

- I enclose subs for each player @ **£45 per term**, which includes £5 Club membership fee per term (cheque payable to TCKC)
 - I am aware that TCKC provides public liability insurance upon receipt of the Membership Fee and that personal accident is not covered.
 - I have included information about all known medical conditions and physical limits so that TCKC can put suitable measures in place to reduce risk
 - I have the information sheet for Team Managers (can be downloaded from website)
 - If I am unable to attend, I shall arrange for another adult to act as Team Manager in my absence
 - I, or another Team Manager, shall supervise our team at all times and give poolside help as required
- Canoe polo fees are transferrable (ie another player can take the place) but not refundable.

Team Manager's signature: **Date:**

Optional: I, as Team Manager, would like to play in a 'Scratch' Adults Team