

Crosby Cricket Club: Senior Registration and Self-Declaration Form for Players

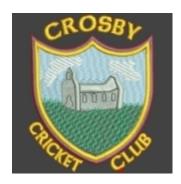
CONFIDENTIAL

If you need more space to enter your details, or you wish to give additional information, please use a separate sheet.

PERSONAL DETAILS

Surname:				
First Names:_				
Address:				
	E-m			
Home Telephone No:		Mobile ⁻	Telephone No:	
With discretion	n, may we contact you a	at work?	Work No:	
Please list any the last five ye	r previous clubs and/or le ears:-	eagues you hav	re volunteered/worke	ed/played in withir
1				
2				
3				
5.				

The England and Wales Cricket Board Ltd (ECB), the Association of Cricket Umpires & Scorers (ACU & S) and affiliated Cricketing organizations aim to promote equality of opportunity for all persons and welcome applications from a wide range of individuals, including those with prior criminal records. The position/membership for which you have applied is an exempted occupation for the purpose of the Rehabilitation of Offenders Act 1974 (as amended by the Rehabilitation of Offenders Act 1975). All "spent" and "unspent" convictions must be declared. Having an "unspent" conviction will not necessarily impede your appointment within Cricket, this will depend on the circumstances and background to your offence. If you fail to disclose an offence and the ECB, the ACU & S or any affiliated organization is later informed of any previously undisclosed criminal matter, you may be subject to disciplinary action. Evaluation of information is based on strict confidentiality and discretion.



1. Have you ever been convicted of any criminal offences?
YES / NO**
If yes, please supply details of any criminal convictions
2. Are you a person known to any Social Services department as being an actual or potential risk to Children or Young People?
YES / NO**
If yes, please supply details
3. Have you ever had disciplinary sanction (from any sports or other organization's governing body) relating to child abuse?
YES / NO**
If yes, please supply details
I understand that it is necessary for me to declare any information requested and that the position/membership for which I have applied may involve access to Children, Young People and/or Vulnerable Adults. I hereby give my consent to the ECB for it to conduct a Criminal Record Bureau (CRB) check if so required. The ECB Welfare Cases Officer may be informed of disclosed information.
Name:Date of Birth
Signature: Date:
Please return to: Barry Smith, IOMCA Registration Secretary, 6 Shore Road, Castletown, IM9 1BF. Tel: 825798

PLEASE MARK ENVELOPE "Private & Confidential – SDF"