ENGLAND NETBALL REGISTRATION FORM (16 AND 17 YEAR OLDS)

MANDATORY INFORMATION REQUIRED FOR AFFILIATION – Please complete form in Block Capitals						
Membership Number (if applicable)						
Affiliation Type: *(Please tick)*		Player/Coach/Umpire		Social & Supporter/Volunteer		
Surname:			**Forenames:**			
Home Address:						
Postcode:			**Email:**			
Phone Numbers:	**H:**		**M:**			
Date of Birth:	*DD/MM/YYYY*					
Gender: *(Please tick)*	**Male**	**Female**	**Transgender:** *(Please tick)*	**Yes**	**No**	**Prefer Not to say**

Ethnicity *(Please tick as applicable)*		**Religion** *(Please tick as applicable)*		**Disability** *(Please tick as applicable)*	
As defined by the 2011 Census			**Christian (including Church of England, Catholic, Protestant and all other Christian Denominations)**	**Do you consider yourself to be disabled under the Equality Act 2010? The Equality Act 2010 defines a person as disabled as an individual that has a physical or mental impairment that has a substantial and long-term negative effect on their ability to carry out normal activities**	
	White – British				
	White – Irish				
	White – Gypsy or Irish Traveller				
	White – Other White Background				
	Mixed – White & Black Caribbean		**Buddhist**		
	Mixed – White & Black African		**Hindu**		
	Mixed – White & Asian		**Jewish**		
	Mixed – Other Mixed Background		**Muslim**	**Yes**	**No**
	Asian or Asian British - Indian		**Sikh**		
	Asian or Asian British - Pakistani		**Any Other Religion**		**Blind or Visually Impaired**
	Asian or Asian British - Bangladeshi		**No Religion**		**Deaf or Hard of Hearing**
	Asian or Asian British – Other Asian Background		**Prefer Not to Say**		**Physical Impairment**
	Asian or Asian British - Chinese	**Sexual Orientation** *(Please tick as applicable)*			**Learning Disability**
	Black or British – Caribbean				**Social or Behavioural**
	Black or British – African				**Mental Health**
	Black or British – Other Black Background		**Heterosexual / Straight**		**Multiple Disabilities**
	Other		**Gay Man**		
	Prefer Not to Say		**Gay Woman / Lesbian**		**Any Other Impairment**
			Bisexual		**Prefer Not To Say**
			Other Sexuality		
			Prefer Not To Say		

DATA PROTECTION: England Netball, your Region(s) and County(s) will use your personal data (including potentially sensitive data) for the purpose of your participation in Netball, for regulatory reasons and to provide you information about Netball.	
	Tick here **if you would like** England Netball & our Partners to tell you more about our netball news and offers by email
AFFILIATION DECLARATION: I certify that all the information is correct and agree to abide by the laws of the game and England Netballs rules, regulations and disciplinary requirements.	
Signature	**Date**