

# ENGLAND NETBALL REGISTRATION FORM (18 AND OVER)



## MANDATORY INFORMATION REQUIRED FOR AFFILIATION – Please complete form in Block Capitals

|                                    |   |   |   |  |                             |  |
|------------------------------------|---|---|---|--|-----------------------------|--|
| Membership Number (if applicable)  |   |   |   |  |                             |  |
| Affiliation Type:<br>(Please tick) | <input type="checkbox"/> Club/YPG Secretary | <input type="checkbox"/> Safeguarding Officer | <input type="checkbox"/> Social & Supporter/Volunteer | <input type="checkbox"/> Player/Coach/Umpire |                             |  |
| Surname:                           |   |   | Forenames:  |  |                             |  |
| Home Address:                      |   |   |   |  |                             |  |
| Postcode:                          |   |   | Email:  |  |                             |  |
| Phone Numbers:                     | H:  |   | M:  |  |                             |  |
| Date of Birth:                     | DD/MM/YYYY                                  |   |   |  |                             |  |
| Gender:<br>(Please tick)           | <input type="checkbox"/> Male               | <input type="checkbox"/> Female               | Transgender:<br>(Please tick)                         | <input type="checkbox"/> Yes                 | <input type="checkbox"/> No | <input type="checkbox"/> Prefer not to Say |
|                                    |   |   |   |  |                             |  |

| Ethnicity<br>(Please tick as applicable)                                 | Religion<br>(Please tick as applicable)   | Disability<br>(Please tick as applicable)   |
|--|---|---|
| <b>As defined by the 2011 Census</b>                                     | <b>Christian</b><br>(including Church of England, Catholic, Protestant and all other Christian Denominations) | <b>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</b> |
| <input type="checkbox"/> White – British                                 |   |   |
| <input type="checkbox"/> White – Irish                                   |   |   |
| <input type="checkbox"/> White – Gypsy or Irish Traveller                |   |   |
| <input type="checkbox"/> White – Other White Background                  |   |   |
| <input type="checkbox"/> Mixed – White & Black Caribbean                 |   |   |
| <input type="checkbox"/> Mixed – White & Black African                   |   |   |
| <input type="checkbox"/> Mixed – White & Asian                           |   |   |
| <input type="checkbox"/> Mixed – Other Mixed Background                  |   |   |
| <input type="checkbox"/> Asian or Asian British - Indian                 |   |   |
| <input type="checkbox"/> Asian or Asian British - Pakistani              | <input type="checkbox"/> Buddhist   | <b>Yes</b>  |
| <input type="checkbox"/> Asian or Asian British - Bangladeshi            | <input type="checkbox"/> Hindu  |   |
| <input type="checkbox"/> Asian or Asian British – Other Asian Background | <input type="checkbox"/> Jewish   | <input type="checkbox"/> Blind or Visually Impaired   |
| <input type="checkbox"/> Asian or Asian British - Chinese                | <input type="checkbox"/> Muslim   | <input type="checkbox"/> Deaf or Hard of Hearing  |
| <input type="checkbox"/> Black or British – Caribbean                    | <input type="checkbox"/> Sikh   | <input type="checkbox"/> Physical Impairment  |
| <input type="checkbox"/> Black or British – African                      | <input type="checkbox"/> Any Other Religion   | <input type="checkbox"/> Learning Disability  |
| <input type="checkbox"/> Black or British – Other Black Background       | <input type="checkbox"/> No Religion  | <input type="checkbox"/> Social or Behavioural  |
| <input type="checkbox"/> Other   | <input type="checkbox"/> Prefer Not to Say  | <input type="checkbox"/> Mental Health  |
| <input type="checkbox"/> Prefer Not to Say                               | <b>Sexual Orientation</b><br>(Please tick as applicable)  | <input type="checkbox"/> Multiple Disabilities  |
|  | <input type="checkbox"/> Heterosexual / Straight  | <input type="checkbox"/> Any Other Impairment   |
|  | <input type="checkbox"/> Gay Man  | <input type="checkbox"/> Prefer Not To Say  |
|  | <input type="checkbox"/> Gay Woman / Lesbian  |   |
|  | <input type="checkbox"/> Bisexual   |   |
|  | <input type="checkbox"/> Other Sexuality  |   |
|  | <input type="checkbox"/> 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 |  |
|-----------|--|------|--|