



# Brussels International 12 Stars CC

## Membership Registration A- Form\*

<b>Name:</b> First name and Family name:	<b>Season:</b> Eg: 2004, 2005 etc
<b>Address:</b>	
<b>Telephone:</b>	
<b>e-mail:</b>	
<b>Date of Birth:</b> (DD/MM/YY)	<b>Age:</b> (If under 18)
<b>Nationality:</b> (eg: British, Belgian etc):	<b>Place of Birth:</b> (as per Passport):
<b>Resident in Belgium since:</b>	
<b>Identification document:</b> (eg: Passport and Belgian Residence Permit (both) or Belgian ID card)	
<b>Passport Number:</b>	
<b>Belgian Residence Permit Number:</b> (Please attach a photocopy to this form)	
<b>BELGIAN ID Card</b> (Please attach a photocopy to this form)	
<b>Have you ever played for another team in the Belgian Cricket Federation?</b>	
Yes: <input type="checkbox"/> _____	No: <input type="checkbox"/>
(Please specify which team and when)	
<p><b>IMPORTANT: The Brussels International 12 Stars Cricket Club does not assume any responsibility for any injuries to anyone in connection with club activities, whether resulting from club practice or competition or other activities. By signing this form the signatory acknowledges that there are inherent risks in cricket and agrees to assume the risk of injury. Brussels International 12 Stars Cricket Club strongly advises all participants in club activities they should always play under their own personal medical insurance.</b></p> <p><b>If you are aged under 18, your legal guardian should sign this form below. The signature will certify that this disclaimer is fully understood and accepted by the legal guardian.</b></p>	

**I, the undersigned, hereby certify that the above information is correct.**

**Signature:**

**Date:**

(of the Member or Parent / Guardian if Under 18)

If the signature above is that of the legal guardian, please state the following details:

**Full name of Guardian:** \_\_\_\_\_

**Relation to the person named above:** \_\_\_\_\_

**Emergency contact telephone number:** \_\_\_\_\_