



STAFFORDSHIRE CRICKET
PLAYER PATHWAY
 PLAYER NOMINATION FORM 2010



Nominated Player Name:		Age at 1 September 2010		Date of Birth	
Address:					
Post Code:					
Trial Venue	(Please detailed preferred venue)				
Telephone number of parent/guardian	Emergency phone number (if parents can't be contacted)	Mobile Phone	e mail		
Please details any medical conditions that the coaches should be aware of:					
Player nominated by:		of	(Club/School)	Email:	
Boys County Age Group u13, u14, u15, u16, u17		Girls County Age Group u11, u13,u15,u17		District U10, U11, U12 (please circle as appropriate)	
<u>Club Played for</u>		<u>Name of School & Post Code</u>		<u>Town of Birth</u>	
Discipline for which player is nominated:					
Batsman:	RH / LH [please circle]	Top / Middle / Lower Order [please circle]		Wicketkeeper:	Yes / No [please circle]
Bowler:	RA / LA [please circle] Fast / Medium / Finger spin / Wrist spin [please circle]				

Playing Record 2009 Summer (U11-U13 must have played a minimum of 4 hardball matches). Please use info from Play Cricket Statistics

<u>Batting (please circle level)</u>	<u>Games</u>	<u>Inns</u>	<u>Not Outs</u>	<u>Runs</u>	<u>High Score</u>	<u>Average</u>	<u>50</u>	<u>100</u>	<u>Ducks</u>
<u>Level; Senior/County/District/Junior</u>									
<u>Level; Senior/County/District/Junior</u>									
<u>Bowling (please circle level)</u>	<u>Overs</u>	<u>Maidens</u>	<u>Runs</u>	<u>Wickets</u>	<u>Best Bowling</u>	<u>5WH</u>	<u>Econ</u>	<u>Strike Rate</u>	<u>Average</u>
<u>Level; Senior/County/District/Junior</u>									
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<u>Wicket Keeper & Fielding</u>	<u>Wktpk Catches</u>		<u>Wktpk Stumpings</u>			<u>Fielding Catches</u>		<u>Fielding Run Outs</u>	
<u>Level; Senior/County/District/Junior</u>									
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Provide detail of previous County/District/Cricket Development Group Representation:			
What are this player's strengths? eg: opening bat, opens bowling, batting all rounder, high order bat etc. Also please explain briefly why you are nominating this player for a County trial:			
Please score the aspects below 5 being excellent and 1 being low levels			Score
<u>Aptitude</u> [Includes technical ability and tactical awareness]			
<u>Attitude</u> [Includes concentration, self-confidence, decision-making, responsiveness to advice, response to pressure, leadership qualities]			
<u>Athleticism</u>			
Signature of ECBCA Coach:		Membership No of ECBCA Coach:	
<p>Club Coach to Note: Please ask the parents/guardians of the player to complete the following before returning the form to <u>Bob Askey, SCB, Himley CC, Stourbridge Road, Himley, DY3 4LB.</u></p> <p>In order to help the SYC monitor its players, which may also assist with future funding applications, please complete the following information where appropriate; <i>Ethnicity; eg: White, Irish, Mixed (White/Black Caribbean), Indian, Pakistani, Caribbean, African, Chinese or any other ethnic group, please indicate as appropriate</i></p> <p><input type="checkbox"/> I give my consent that in an emergency situation, SCB may act <i>in loco parentis</i>, if the need arises for the administration of emergency first aid and / or other medical treatment which in the opinion of a qualified medical practitioner may be necessary. I also understand that in such an occurrence that all reasonable steps will be taken to contact me or the alternative adult who I have named above.</p> <p><input type="checkbox"/> I confirm that to the best of my knowledge, my child does not suffer from any medical condition other than those detailed by me above.</p> <p>Data Protection SCB shall use the information provided on this form (together with other information it obtains about the player) to administer his/her cricketing activity. In some cases this may require SCB to disclose the information to County Boards, Leagues and to the England and Wales Cricket Board. In the event of a medical issue or child protection issue arising, SCB may disclose certain information to doctors or other medical specialists and/or to police, children's social care, the Courts and/or probation officers and, potentially to legal and other advisers involved in an investigation.</p> <p>By returning this completed form, I agree to my child in my care taking part in the SCB activities and that my child shall conform with SCB rules.</p>			
Signed Parent/Guardian		Date	