A white and black logo

Description automatically generated with low confidence

**Online PVG Application**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Applicants Full Name |  | | | | |
| Address |  | | | | |
| Contact number |  | | | | |
| Email address |  | | | | |
| DOB |  | | | | |
| New Application to Join PVG Scheme |  | | | | |
| **OR** Existing PVG Member Update |  | Membership No (16 digits): | | | |
| Post applied for: | Coach | | | Parent Helper | |
| Assistant Coach | | | Child Protection Officer | |
| Team Manager/Organiser | | | Physiotherapist | |
| Course Tutor | | |  | |
| Regulated Work with | Children | | Adults | | Both |
| Cricket Club |  | | | | |

Confirmation of Identity:

I confirm that I have seen the under noted documents (please tick all boxes that apply) and that they relate to the person identified above who is the subject of a PVG Scheme application.

**3 forms of ID must be seen, including one photo ID and one proof of address. Collectively the ID must confirm Date of Birth and Address. Address documentation must be dated within the previous three months.**

|  |  |  |
| --- | --- | --- |
| Birth Certificate |  |  |
| Passport | Country of Issue: | Number (9 digits): |
| Driving Licence (with photo) | Country of Issue: | Number (16 digits): |
| Driving Licence (without photo) | Country of Issue: | Number (16 digits): |
| Other | Please specify: | |

|  |  |
| --- | --- |
| Authorised signatory: (Electronic signature is preferable but type written is acceptable) |  |
| Name (capitals): |  |
| Position |  |
| Date |  |