



# Bodmin Youth FC

[www.bodminyouthfc.co.uk](http://www.bodminyouthfc.co.uk)



Players Name: \_\_\_\_\_

Players DOB (d/m/y) \_\_\_\_\_ Players Age: \_\_\_\_\_ School Year: \_\_\_\_\_

Parent / Guardians Name: \_\_\_\_\_

Address:

\_\_\_\_\_  
\_\_\_\_\_

## Contact Details

- Home: \_\_\_\_\_ Mobile: \_\_\_\_\_
- E-Mail: \_\_\_\_\_

*We will keep you up to date via email and mobile largely so please be sure to fill in these details correctly*

## Emergency contact details

Name 1: \_\_\_\_\_ Emergency Tel No: \_\_\_\_\_

Name 2: \_\_\_\_\_ Emergency Tel No: \_\_\_\_\_

Name 3: \_\_\_\_\_ Emergency Tel No: \_\_\_\_\_

Medical Conditions/Allergies: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Any Regular Medications Required? \_\_\_\_\_

GP Name and address: \_\_\_\_\_

\_\_\_\_\_



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## Photography Consent

Please circle appropriate response

I consent to photographs and videos of my child being used in fundraising activities or to promote the club and to be used on the website.    YES                      NO

## Collecting Juniors Consent

Please circle appropriate response

- I will collect my child from each session/match from the training ground/pitch, or an agreed other to do this for me
- I give permission for my child to wait outside unattended at the training ground/pitch. I do not expect a member of the club to wait with my child.
- I give child for my permission to walk home on their own from training sessions and matches

## Parental Consent

My child and I are aware that participating in football and associated training is a potentially hazardous activity. In the event that my son / daughter is injured while playing football / travelling to or from football events and I cannot be contacted on the above emergency number, I hereby give my consent for my child to receive medical attention. I also agree to be bound by and to observe the Club Rules and the Rules and Regulations of the Football Association Limited and Football Association, and all competitions in which the club participates. This also covers media authorisation for games & tournaments.

I enclose £..... As a membership fee, to be repayable if this membership is not successful.

I also understand that is my responsibility to get my child to and from all training and matches (including away games) and will arrange the necessary transport.

**Parent:**

- **Name (print):** \_\_\_\_\_ **Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Player:**

- **Name (print):** \_\_\_\_\_ **Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_