



## PLAYER REGISTRATION FORM UNDER-6 AND BELOW – PRINT

### Player Registration Form - Under 6 and below

**Player Name \***

**D.O.B (DD/MM/YYYY) \***

**School / College Attended (Please type N/A if not at school) \***

**Medical Information \***

Please include details of any medical conditions, allergies, disabilities, ongoing medication or treatment. (Please type none if not applicable)

**Medical Content and confirm the medical information provided is complete and accurate \***

I acknowledge and agree

I have completed the medical information and consent that in the event of such an incident any necessary treatment can be administered to my child by suitably qualified persons. I understand that whilst team and club officials will take every reasonable precaution to ensure that accidents do not happen, they cannot necessarily be held responsible for any loss of or damage to property or injury suffered by my child.

**Players Home Address inc Postcode \***

**Name of Parent(s) or Guardians \***

**Mobile No: \***

**Home No: \***

**Email Address \***

**Emergency Contact - 1 \***

Please include Name, address and Phone numbers and specify relationship to player.

**Emergency Contact - 2 (if possible)**

Please include Name, address and Phone numbers and specify relationship to player.

**Photography and Videoing Consent \***

I acknowledge and agree

I have read the policy and give permission for photographs/video to be taken of my child whilst participating in football at Langho FC (this includes team photographs) and whilst taking part in tournaments and club events, and, that such photographs/videos can be used for the promotion of Langho FC, publication in match reports & newsletters.

**Code of Conduct for parents and spectators \***

I acknowledge and agree

I have read the Club's code of conduct for parents and spectators, I understand my obligation towards the team, the opposing team, match officials and to the Club, and I agree to abide by its terms at all times.

**Respect code of conduct for players \***

I acknowledge and agree

I have read the Respect code of conduct for players with the player named on the registration form and he/she understands his/her obligation towards the game and the team, and will treat with respect the laws of the game, the opposing team, the match officials and to the officials and spectators of both teams, and I agree to abide by its terms at all times.

**Club Fees - Please confirm that you authorise the following one off and recurring fees \***

Club Registration Fee - One off charge of £30 (additional players fees are £20).

Annual Club Subscription - £80 (fees are managed through iTeammate and

GoCardless recurring at £10 per month for 8 months

If you have not already, you will need to setup an iTeammate account and a GoCardless account. Links can be found below and on our website menu.

**Signature \***

If completing this form online, please enter your full name as signatory for this form

**Date Completed \***

**GDPR Agreement \***

I acknowledge and agree

I consent to having this website store my submitted information so they can respond to my inquiry.