

TWYFORD SPARTANS YOUTH FOOTBALL CLUB



MEMBERSHIP REGISTRATION, MEDICAL AND GENERAL INFORMATION FORM

Player's Full Name .....

Address.....

..... Post Code .....

Home Telephone Number ..... Date of Birth .....

Email address .....

Name of School .....School Tel Number .....

It is important for us to contact you if necessary, so please give details of contact numbers:

Emergency Parent / Carer Details

First Name ..... Surname .....

Phone Number ..... Mobile Number .....

Email address ..... Date of Birth .....

Parents email address will be used to register your child for the Devon FA Membership Scheme and create FA Number (FAN).

In the event that the above named person cannot be reached, please give two extra emergency contact names and numbers:

Name ..... Emergency Contact No. ....

Name ..... Emergency Contact No. ....

Doctor's Name ..... Address .....

..... Telephone No. ....

When did your child last have a tetanus injection? .....

Does your child suffer from allergies? YES / NO If YES please give details .....

Does your child have any health problem which require medication? YES / NO

If YES please give details below:

Table with 2 columns: Name of Medication, Why it is taken

Has your child ever suffered a serious injury which needs to be brought to the Club's attention eg broken arm or leg? YES / NO

If YES please give details .....

At times the Club may wish to take photos or videos of the teams or individual in them. We adhere to The FA Guidelines to ensure these are safe and respectful and used solely for the purpose for which are intended, which is promotion and celebration of the activities of the Club for training purposes. The images may be published on the Club's website, Facebook pages of twitter. YES /NO

The club uses a Facebook page to communicate with parents/guardians. Children over the age of 13 may use Facebook, but FA guidance requires us to get your permission before allowing U18's access to our Facebook Pages. If your child is over 13, please indicate if it is acceptable to you for your child to 'like' the Club's Facebook page. Please circle Yes if it is acceptable or circle No if it is not. If you indicate No, we will use Facebook's settings to ban your child from liking & commenting on our pages. YES/NO

**PARENTAL CONSENT**

In the event that my child is injured whilst playing football or travelling to and from football events and I cannot be contacted on the above number, I hereby give my consent for my child to receive medical attention.

Signed .....Date.....

Print Name .....

**Please rest assured that all information disclosed will be treated with the utmost confidence**