

BARNHAM TROJANS FOOTBALL CLUB

FA Number (FAN) if known: _____

Application for Membership – 2020/2021 (WGS) Whole Game System

FULL TEAM NAME _____

AGE GROUP _____

PLAYER'S DETAILS

It is now a requirement of the GDPR (General Data Protection Regulation) to inform you that this data, including a current photograph, will be kept securely by the Club's Registration Secretary, and shared with the Club Secretary, Team Manager and League Registration Secretary. It will also be entered onto the FA Whole Game System and FA Full-Time. It is required to enable eligibility to play for this team and for contact concerning Club /Team activities.

Player's full Name: _____ Date of Birth: _____

Address: _____

Post Code: _____

Tel No: _____ Mobile: _____ Email Address: _____

School: _____ School Year from Sept 2020: _____

Have you played for a team in another country? Please delete as appropriate: Yes / No

If Yes, have you got International Clearance: Please delete as appropriate: Yes / No

Clubs: _____ Country: _____

Do you consent for your child's photograph to be put in local newspapers or on the Barnham Trojans website from time to time? And understand that if consent is not given they will need to be excluded from team photo's? Individual names will not be shown. Please delete as appropriate: **I agree / I do not agree.**

FIRST AID

It is now a requirement of the GDPR (General Data Protection Regulation) to inform you that this data will be kept by the Club's Registration Secretary and shared with the Team Manager and League Registration Secretary. It will also be put on the back of the registration ID card. It is required in case of an emergency so that the emergency contact can be notified, and appropriate treatment can be administered.

Emergency Contact – Name _____ Telephone number: _____

Relationship to player _____ Mobile number: _____

Details of any illness / disability / behavioural Problem _____

Details of any allergies that might affect medical treatment _____

Authority for Medical Treatment

In case of an emergency Barnham Trojans have permission to allow a doctor to undertake whatever treatment is considered necessary. Please delete as appropriate: **I agree / I do not agree**

I hereby permit my son/daughter..... to play football and participate in any other activity of the **BARNHAM TROJANS FOOTBALL CLUB**, being fully aware that the said Club accepts no liability whatsoever in respect of damage or loss of property, or personal injury, which maybe incurred.

I agree that, should my child cease to be a member of **BARNHAM TROJANS FC** all items of kit or equipment which have been supplied by the Club shall be returned in a timely fashion and in acceptable condition. If said items are not returned, then I agree to reimburse the Club to a maximum of £50.00.

CODES OF CONDUCT

PARENT'S CODE OF CONDUCT: I confirm that I have read and understood the document. Parent's Code of Conduct. I accept that by confirming yes, I have effectively 'signed' the document. **State Yes / No**

PLAYER'S CODE OF CONDUCT: I confirm that the player has read and understood the document: Player's Code of Conduct. I accept that by confirming yes the player has effectively 'signed' the document. **State Yes / No**

DATA PROTECTION

All data kept by the Club will be held up to one year after the player leaves BARNHAM TROJANS when it will be deleted. If any information you have given changes you must inform us immediately. You have the right to ask for data to be removed from our records and we will inform you by email when it has been done.

Please complete the following relating to the data collected and then sign and date the form

I consent to BARNHAM TROJANS keeping my son/daughter's personal details for registration to the Club and Team **Yes / No**

I Consent to BARNHAM TROJANS keeping my son/daughter's medical details and a contact in case of emergencies **Yes / No**

I Consent to BARNHAM TROJANS keeping my contact details, including email address, for contacting me concerning BARNHAM TROJANS activities and news **Yes / No**

Signed: _____ (Parent / Guardian) Date: _____

The Club would like to encourage Parents/Guardians, siblings, and other family members to show their support by becoming non-playing members.

Forms are available from the Club Secretary, Via the website or from your child's manager.

I enclose membership fee of (please tick as applicable):

[] £60.00 for Under 7, 8, 9, 10's

[] £65.00 for Under 11, 12, 13, 14, 15, 16, 18's

NB: 2nd / 3rd child in family is half price.

Details of full price sibling:

Name: _____ Age: _____

Membership is renewable 1st June annually. Cheques (preferred) to Barnham Trojans FC.

CHECKLIST (please ensure all required items are submitted)

New Members

Completed League application form

Proof of ID & age (see League Form)

Completed Club Membership form

Appropriate fee /indicate amount & method AMOUNT £.....

CHEQUE []

CASH []

Completed Parental Contract

2 Passport-sized photos'

ID Card (if previously registered with another team in ACYFL League)

Renewals

Completed Club Membership form

Appropriate fee /indicate amount & method AMOUNT £.....

CHEQUE []

CASH []

ID card (from your team manager)

1 Passport-sized photos (not same as last year

Possibly taken by team manager)

For completion by the manager:

Manager's Name _____

Date fee received _____ Cheque Amount £ _____ Cash Amount £ _____ BACS Amount £ _____