

Boscombe Albion Youth Football Club



Membership Form for season 2023- 2024

Player Information

Name:

Date of Birth:

Team Name: BOSCOMBE ALBION FC

Age Group:

Address:

House number and street	
Second line of address	
Town	
Post code	
Email Address	

Primary Contact Information

Name:

Relationship:

Email Address:

Mobile:

Date of Birth (is required by FA)

Address (if different from above)

House number and street	
Second line of address	
Town	
Post code	

Emergency Contact Information

Name & DOB:

Relationship:

Email:

Phone (Mobile)

Phone (Home if different)

Phone (Work)

Medical Information

Name of GP

Phone Number

House number and street	
Second line of address	
Town	
post code	

Does the Player have any relevant medical conditions Yes / No

Details.....

Is the Player allergic to any medication Yes/No

Details.....

Does the Player have any disabilities or special educational needs which you would like the club to be aware of? Yes / No

Details.....

Boscombe Albion YFC are unable to administer any medication, However Managers can hold medication for the players to administer themselves egg, Inhalers.

Does the Player wish the Manager to hold any medication for them Yes / No

If Yes please ensure all medication is clearly labelled.

Parent / Guardian Agreement

- I have read and agree to the Spectators code of conduct
- I agree that, in addition to myself, any other spectators of the Player who are present at any of the matches or training sessions will adhere to the spectators code of conduct.
- I give permission for my Son/Daughter to receive First Aid from a trained First Aider should it be required.
- I consent to the Club providing my Son / Daughters registration details to the BYFL League and the Hampshire FA and also the FA in London which will be stored securely in accordance with the Data Protection Act 2018. The club will use the information for Football and Club activities only and will not share your information.

At times Boscombe Albion may wish to take photos and videos of teams and Individual Players, we adhere to the relevant FA guidelines to ensure that these are safe and respectful.

Photos and videos will only be used for the Promotion and celebration of club activities and for Training purposes.

Please indicate that you are happy for photos and videos of your Son / Daughter to be used in this way

Yes / No

'I understand that Football can involve injuries and agree that neither the League nor the club shall be held responsible/Liable for and injuries sustained whilst I am playing for the club.

I accept that it is my responsibility to have my own insurance to cover Injury, sickness or ill health

I have read (or had this explained to me) the Players code of conduct and agree to it.

Signed Player.....Date.....

Signed Parent / Guardian.....Date.....