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|  | ST MARTINS AC – MINI’S SECTIONRegistration and Parental Consent Form**U13 – U 15***2022 / 2023 SEASON* |
| **CHILD PROTECTION PARENTAL CONSENT FOR PARTICIPATION IN FOOTBALL ACTIVITIES** |

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|  |  |
| --- | --- |
| Player Full Name  |  |
| Player Date of Birth |  |
| School yr as at 1st Sept 2022 |  |
| School |  |
| Address inc Post Code |  |

**Parent/Guardian or Emergency Contact Details**

|  |  |
| --- | --- |
| Contact Name |  |
| Contact Date of Birth |  |
| Relationship |  |
| Contact Tel No |  |
| Email address |  |

**Teamer:** Please check your teamer account to ensure details are up to date, a current mobile number and email address are required. Invites will be sent by teamer for all training and matches – please respond promptly to enable coaches to plan accordingly as sessions will be planned around the numbers that respond. Please ensure contact details are those of an adult.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Subs Payment | Cash | Chq | Online |  |
| Teamer | Existing | Removed | Link Sent |  |
| Kit | Ordered | Delivered | Paid |  |

**PTO**

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| ST MARTINS AC – U 13-U15 Youth Football *2022/ 2023 SEASON* |

**Details of Football Activity**

I agree to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (player’s name)

taking part in any activity as described below and I acknowledge the need for him / her to behave responsibly and within the FA laws of the game. Full info, including all **Child Welfare documents**, can be found on our website, [www.stmartinsac.com](http://www.stmartinsac.com)

**Medical Information**

Does your child have any medical condition that may affect them during any football activity which their year group coaches should be aware of?

Yes / No If yes, please give details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Declaration**

**Images/Data** – I am aware that at times the club may wish to take photos or videos of the team in and that these will be available for viewing via the St Martins AC website. I note the club adheres to FA guidelines to ensure these are safe, respectful and used solely for the purpose they are intended for. Data supplied will be recorded and used club purposes as required. Data requested by GFA/FA may be supplied by the club. I confirm by signing that this is acceptable to me

**Medical treatment** – I agree to my son / daughter receiving medication as instructed and any emergency dental, medical or surgical treatment, including anaesthetic or blood transfusion, as considered by medical authorities present.

**Insurance** – I am aware the Club’s Insurance Policy may not cover any expenses incurred during medical treatment towards any child in your care. Therefore, I understand that I have been advised that private medical insurance should be obtained to cover my child.

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Subscriptions for 2022/2023 Season**

**£145 includes GFA Registration Fee, matches and training**

**(does not include fines issued by Match Officals)**

**Please return completed registration form to:**

**Nicki Hamon, Bodyline Ltd, La Planque Lane, Forest, Guernsey GY8 0DR**

**Online payments may be made to Sort Code 60-09-20 A/c number 74144375 - please state player name and Year group as at Sept 2022 or cheques payable to St Martins AC may be posted with registration form.**

**Any questions to** **admin@guernseysaints.com**

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