

Borough Green Junior Football Club

SEASON 2019/20

Club Membership and Parental Consent Form

This form is to be completed by the all Playing Members ("Members") whether signed on to play in league teams or not. The Club will keep a register of the Members of the Club.

MEMBERS DETAILS

Full Name:
Date of Birth:

PARENT / GUARDIAN / CARER DETAILS

Full Name:
Home Address:
Post Code:
Mobile Tel.:
Email Address:

2nd CONTACT DETAILS

Full Name:
Mobile Tel. 1 :
Email Address 1 :

Player Education Details (if applicable – playing Members only)

School:
School year as of October 2019:
School Tel.:

Contact details must be kept up to date. If any of the above circumstances change, it is the parent / guardian's responsibility to notify the club
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DECLARATION to our CODE of CONDUCT

I agree to be bound by and to observe the Club Rules and Regulations and the Rules and Regulations of The Football Association Limited, The Football Association and The Kent County Football Association, and all competitions in which the Club participates.

The Club draws your attention specifically to the Manager/Coach, Player's, Parent/Guardian/Carer's and the Spectators Codes of Conduct, which are available from the Club Secretary or the Club web site & the brief summary below. Anyone not adhering to the Code of Conduct may be asked to leave the Club and will have their membership revoked.

- Any Member who is the subject of disciplinary action which results in a financial liability or causes the Club any other financial loss by his / her action or inaction will be required to reimburse the Club in full any monies which may be paid on their behalf at the discretion of the Officers of the Club.
- I accept that the Club and its Officials will not be held responsible for personal injury suffered whilst playing, training or participating in any activity connected with the Club, nor will any Official(s) of the Club be responsible for any property lost whilst participating in Club activities.
- I am aware that equipment provided by the Club remains the property of the Club and must be returned on request.
- Respect to players, managers, coaches, referees, parents, opposing team players and supports and officials must be shown.
- No coaching by parents from the sidelines.
- Positive support only. Negativity will not be tolerated.
- Only the Club website, Facebook, Twitter & Managers WhatsApp group is monitored by the club. Individual team WhatsApp groups are not the responsibility of the club and all posts do not represent the club.
- The club will only become involved with club / footballing matters.
- Failure to make the required payments will mean termination of membership. The member will not be allowed to train, play or represent the club until all fees are up to date. Payment Dates are 03/04-06-19, 09/10-09-19 & 13/14-01-20.
- The club reserves the right to remove membership for any breach of the code of conduct

Signed: Date:

Print Name:

You are reminded that by signing this form you agree to be bound by all the rules and regulations of the Club including the Clubs Codes of Conduct.

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CONSENT TO USE IMAGES OF CHILDREN

From time-to-time, Borough Green Junior Football Club (“Club”) may take photographic images or video recordings of its players during matches, training and Club events. These images can be used to promote the Club in publications, newspapers, media or on the Club website. They can also be used to improve player performance. To comply with the Data Protection Act 1998, General Data Protection Regulation (GDPR) and the Club’s Child protection policy, your permission is needed before we can photograph or make any recording of your child. Please read and answer all questions below and put circle around Yes or No as appropriate.

Please circle your answer

- | | |
|---|----------|
| 1. I give permission for my child’s image (unidentified) to be used in Club publications & social media | Yes / No |
| 2. I give permission for my child’s image (unidentified) to be used on the Club website. | Yes / No |
| 3. I give permission for my child to appear in photographs published in press / media. | Yes / No |
| 4. I give permission for my child’s full name to be published together with a press photograph.
(At present, some newspapers will not publish a photograph without a full name.) | Yes / No |

Notes / Conditions of use

Club means Borough Green Junior Football Club and its subsidiaries/affiliates.

‘Unidentified’ means First name only will be used. This form is valid for the season at the top of the form only and your consent automatically expires after this time. You are entitled to withdraw or change your agreement at any time, but it is your responsibility to inform the Club by submitting a revised Consent form.

As the players’ Parent / Guardian / Carer, I / we understand that if we take photographs or video recordings of our child which include other players, we will use these for personal and family use only. I / We further understand that where consent has not been obtained from parents for any other use, we would be in breach of the Data Protection Act 1998 & GDPR if we used photographs or recordings for any wider purpose

Signed: Date:

Print Name:

You are reminded that by signing this form you agree to be bound by all the rules and regulations of the Club including the Clubs Codes of Conduct.

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MEDICAL CONSENT FORM

MEDICAL DETAILS

Members Name :

Please indicate if you have any medical conditions we should be aware of (e.g. asthma).

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Emergency Parent/Carer Details

Full Name:	
Home Address:	
Post Code:	
Home Tel.:	Mobile 1 Tel.:
	Mobile 2 Tel.:

Extra emergency contact names and numbers:

Full Name:	
Relationship:	Emergency contact no.:
Full Name:	
Relationship:	Emergency contact no.:

Parental Consent

In the event that my son / daughter is injured while with the club and I cannot be contacted on the above numbers, I hereby give my consent for my son / daughter to receive medical attention.

Signed: Date:

Print Name:

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SEASON 2019/20

MEDICAL CONSENT FORM

MEDICAL DETAILS – MANAGER’S COPY

(to be kept in the manager’s kit bag at all times)

Members Name :

Please indicate if you have any medical conditions we should be aware of (e.g. asthma).

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Emergency Parent / Carer Details

Full Name:	
Home Address:	
Post Code:	
Home Tel.:	Mobile 1 Tel.:
	Mobile 2 Tel.:

Extra emergency contact names and numbers:

Full Name:	
Relationship:	Emergency contact no.:
Full Name:	
Relationship:	Emergency contact no.:

Parental Consent

In the event that my son / daughter is injured while with the club and I cannot be contacted on the above numbers, I hereby give my consent for my son / daughter to receive medical attention.

Signed: Date:

Print Name: