

Dinnington Town Football Club



Registration Form



Player Details

Name of Player	
Date of Birth*	
Age at start of season (12:00am 1 st September)	
Home Address	
Home Phone Number	
School Attended (if applicable)	

*Please provide a copy of the players birth certificate with this form – the Club could be subject to an inspection by the appropriate league. This is not needed for our Nursery 4 – 6-year-old teams.

Carer's Contact Details (Under 18's only)

Relationship to Child	Name	Date of Birth	Mobile	E-Mail
Mother				
Father				
Other				

*If the child is not living with parents please clarify the legal status of the child and his/her current carers.

**Please indicate primary e-mail contact (if preferred) by putting an asterix next to the primary email

It is important that you fill in the rest of this form as fully as possible.

Failure to tell us things could mean that the safety and welfare of players are compromised.

The Club cannot be held responsible if information has not been shared.

Health and Welfare

Do you/your child have any known health needs? e.g. diabetes, asthma, epilepsy, allergies.		Yes / No
If yes, please advise and complete the medication section below as applicable.		
Current Medication Name		
Dose / Frequency		
What does the Club need to do to help keep you/your child well? e.g. administer planned medication/call ambulance/give snacks. Please be very specific.		
Do Club members need any medical training other than First Aid to care for you/your child? If yes please specify.		
Do you/your child have any access needs? If yes please tell us what we need to do to help.		
Do you/your child have any communications needs? e.g. non-English speaker/hearing impairment/sign language user/dyslexia. If yes please tell us what we need to do to enable communicate with us.		
Do you/your child participate in religious or spiritual practice? Please tell us what it is and are there any guidelines we need to follow or support.		

Images

<p>At times the Club may take photos or video of the team or individuals in it. We adhere to the FA Guidelines to ensure these are safe and respectful and used solely for the purposes for which they are intended, which is the promotion and celebration of the activities of the Club.</p> <p>You can revoke your permission to share images at any time by emailing hello@dinningtontown.co.uk outlining your players name and current team. The revocation will not affect any actions taken before the receipt of this written notification.</p>	
Please indicate that this is acceptable to you?	Yes / No



Have your say and keep up to date with club updates

I give consent for my child to participate in Dinnington Town Football Club's events and agree to the conditions outlines above. I accept that it is my responsibility to inform the Club directly

Click on the link below or use the QR Code to join.

<https://chat.whatsapp.com/legEqleSjro2yKD6DYPtZB>



(Open the camera on your phone & click on the link to join the Dinnington Town Football Club Community WhatsApp.)

Consent of Parent / Guardian (Under 18's only)

I give consent for my child to participate in Dinnington Town Football Club's events and agree to the conditions outlines above. I accept that it is my responsibility to inform the Club directly of any changes to the details recorded in this form.

If my son/daughter is injured whilst playing football / travelling to and from football events and I cannot be contacted on the above number(s), I hereby give my consent for my child to receive medical attention.

I agree to be bound by and observe Dinnington Town Football Clubs Constitution, Codes of Practice and Rules and the rules and regulations of the Football Association, and all competitions in which the Club participates.

I agree to pay all registration and subscription fees as outlined by the appropriate age team manager.

This form is to be signed by all adults wishing to attend junior football matches.

	Sign	Print	Date
Parent / Guardian Signature(s)	_____	_____	_____
	_____	_____	_____
	_____	_____	_____



Player's Consent

For Nursery and Mini-Soccer Players

I will try my best in all Dinnington Town Football Club's activities and will stick to the Club rules and the Players code of conduct.

I will tell the coach or another person if I do not feel well or if I have any worries.

For Full Sided Game Players

I agree to take part in Dinnington Town Football Club's activities, and I have read and will abide by the Players code of conduct.

I agree to adhere to the Club guidelines and rules that are issued in the interest of my own welfare and safety, and I will seek help or advice if I have any concerns even if they appear to be non-football related.

	Sign	Print	Date
Player Signature of Player	_____	_____	_____

Please return to the club at the appropriate registration event with a club registration fee.

This fee will be used to cover all County FA affiliation, League registration costs, Insurance, as well as progress the development of the club and in return each junior player will receive a gift from the club and a season ticket to all senior team home fixtures

***Fee not required for our Nursery 4 – 6 year old teams.**

	Sign	Print	Date
Signature of Team Manager	_____	_____	_____
Countersigned by Club Official	_____	_____	_____

