

CRAMLINGTON UNITED F.C.

Player Registration Form
Doc. Ref: CUFC015



V2.0 - July 2021

Any printed copies of this document are not controlled

Club Registration Form

Player Name:	
Date of Birth: / /	
FA Number: <small>(If known)</small>	Birth Cert: Passport No: <small>(need one of the above please)</small>
Address:	
Post Code:	
Parent/Guardian, Name:	
Mobile Phone No:	Other Tel No:
E-Mail Address:	
Alternative Contact, Name:	
Mobile Phone No:	Other Tel No:

Health Declaration: Please give details of anything you consider club personnel should be aware of.
We will treat all disclosures in the strictest confidence.

I will keep the club informed in writing of any changes to the above declaration and advise of any new issues.

- I consent / do not consent (*delete as appropriate*) to the photographing/videoing and publication of images for the sole use of Cramlington United F.C. eg Club Website, Club Newsletter, promotional campaigns and coaching purposes. *N.B. No names will be used to directly identify children.*
- I consent / do not consent (*delete as appropriate*) to the administration of emergency first aid and other medical treatment where considered appropriate by our qualified coaches.

I confirm I have read and understood CUFC Codes of Conduct (CUFC005) (available on Club Website)

I confirm I have read and understood the Clubs' Privacy Notice (CUFC012) (available on Club Website)

	Print Name	Signature	Date
Player			/ /
Parent/Guardian			/ /
Coach			/ /

Age Group: _____ **Team Name:** _____