

AGE GROUP

PETERBOROUGH RUGBY UNION FOOTBALL CLUB (PRUFC)

(Registered under the Provident and Friendly Societies Act 1965 Reg: 28551R)



MINI & JUNIOR (M&J) CLUB REGISTRATION, PHOTOGRAPHIC AND MEDICAL CONSENT FORM

This form **MUST BE COMPLETED** by a parent/guardian **BEFORE** your child/young person can participate in **ANY CLUB ACTIVITY** (with the exception of the first 3 training sessions provided the parent/guardian remains at the training). One form must be completed for each child/young person. The form should be returned, together with your Club Registration fees and team subscriptions to the relevant team Coach/Admin Member. On acceptance of Club registration you will receive a signed Club Fixture Card as evidence of your membership which contains details about the Club Executives and all team fixtures.

Players Details			Parent/Guardian 1			Parent/Guardian 2			Doctors Details	
First Name	Surname	Date of Birth	First Name	Surname	Date of Birth	First Name	Surname	Date of Birth	Doctors Name	
									Doctors Address	
Home Tel										
Mobile										
E-Mail									Tel No:	
Street									Medical No	
Area									Contact Details (NOT MEDICAL DETAILS) are circulated amongst players, parents & coaches of your relevant age group. This helps facilitate, arranging lifts, social arrangements etc. If you DO NOT want your contact details to be distributed to team players & parents please enter NO in the box. <input type="checkbox"/>	
Town										
County										
Post Code										
School			Enter parents/guardians names as they want to be called and address/contact details IF DIFFERENT to player							

Please **complete all** the following boxes. If your child/young person has nothing to report in a certain box please make sure that you write N/A or NO in the box.

Any medical condition requiring medical treatment /medication (i.e. asthma, epilepsy, etc)	
Takes any regular medication (provide details)	
Has an allergy to any medication	
Has any other allergies (bee stings, nuts, hay fever etc)	
Give details if they have been in contact with any infections/contagious diseases in last 4 weeks.	
Any special dietary requirements and the type of pain/flu medication that may be given.	1.
	2.
	3.
	4.

MEDICAL CONSENT AUTHORISATION

I hereby give permission for (Print Name) _____ to participate in rugby football related activities (playing, training and travelling) whilst he/she is a registered member of PRUFC. I also authorise PRUFC staff/volunteers (who have the appropriate training or qualifications) to provide first aid treatment of any injury or illness whilst in their care. In the case of emergencies I consent to my child receiving emergency medical treatment where qualified medical personnel deem it necessary and assuming that all reasonable efforts have been made to contact me or the other named person on this form.

Date: _____

Parent/Guardians Name (Print): _____

Signature

Note: A young person can give their own consent for medical treatment if they are over 16.
An EU Health Card will be required for medical treatment outside the UK and EU when on tour.



General Information

In accordance with the Club rules the Committee reserves the right to refuse membership to any individual. A copy of the Club rules is available from the Club Secretary on request or on www.prufc.com It is your responsibility to keep your Team Administration Member up-to-date with any changes in your contact details or your child/young person's medical conditions throughout the year. Players will be provided with Club Shirts for matches but parents/guardians are responsible for ensuring that suitable clothing, footwear, **MOUTHGUARDS** etc are available for matches and training. Club ties are also required for Junior Members.

Insurance (Players, Coaches, Referees & Officials)

All fully paid up playing members and playing associates are covered by the RFU Insurance Policy relating to Total Permanent Disabilities and death, whilst partaking in, or travelling to or from matches and training sessions. This also extends to any person invited by the Club to officiate at Club activities covered by insurance. The Club does not purchase cover for temporary disability or loss of earnings or medical expenses. Members are recommended to make their own arrangements for such cover. Details of PRUFC cover for risk are available from the Club Secretary on request or on www.prufc.com

CLUB CHARGES

1. All players and coaches must be registered members of the Club.
2. Membership fees vary dependant on age and number of family members playing.
3. Each player has to pay a set amount for the season for First Aid Cover.
4. In addition to Club membership fees, each player is required to pay match fees and make a contribution towards social activities. The amount required varies dependant on the age group. The frequency of collection also varies; teams may collect weekly, monthly, half yearly or annually.
5. Please ask your Team Administrator/Coach for further information on the above charges or refer to the Club web site.
6. Note that cheques should be made payable to PRUFC. One cheque for the Club Membership and First Aid Cover and a separate cheque for Team Match Fees and Social Subs.

PHOTOGRAPHIC CONSENT

The Club has a number of approved photographers who regularly take photos of players during training and matches. These photos may be used for promotional advertising and may be displayed on the Club web site. If you do not want photos of your child/young person to be used in this way to promote the Club and rugby please enter NO in the box.

Tick the box if you have a First Aid qualification

Tick this box if you would not like mail from our sponsors

Please give details of any skills or services you would like to share with fellow members.

Administrative Use Only

	Date Rec'd	Date to Club or Parent	Amount	C	Q
Membership Fee					
First Aid Fee					
EMRU form					
2 Passport Photos					
Handbook					
EMRU Card No					
Player No					

C = Cash
Q = Cheque

Subs (annual & bi-annual)	Date Rec'd	Amount	C	Q	D Rec'd	Amount	C	Q

Registration Check List (Parent/Guardian to Tick the boxes as appropriate and return this form to the appropriate Coach/Admin Member)

- All areas of this form have been completed in full, dated and signed.
- Club First Aid Fee enclosed : Amount _____
- Club Membership Fee enclosed : Amount _____
- Team Match Fees Enclosed: Amount _____

New Members or player moving from Mini to Junior age group

- 2 Passport photographs of player
- Completed East Midlands Registration Form

Note: Cheques should be made payable to PRUFC see Club Charges number 6