

WRFC Mini/Junior Membership Application and Consent Form 2010/11

This form is to accompany all renewals and Any new member or transfers from another club

This form should be completed, signed and **returned to the Age group Manager**, with a cheque for the appropriate subs, within 7 days if you are renewing your membership.

If you are a new member or transferring from another club, you must also complete an RFU Player registration form and provide **ONE PASSPORT SIZED PHOTO** with name and date of birth on the reverse

Player's name: _____

Address _____

_____ Postcode _____

Home Tel: _____ Work Tel: _____

Parent's mobile(s) _____

Home email: **(please be legible!)** _____

Work email: _____

Date of Birth: _____ RFU Player No (if known) _____

Parent's first names and any relevant medical conditions/allergies etc

DECLARATIONS

- I declare that the personal information I have supplied to the club, in whatever form, written verbal or electronic, is correct. In signing this form I agree that the player be bound by the Laws and resolutions of the Rugby Football Union and its constituent bodies and by the Rules of Worcester Rugby Football Club. I have also seen and agree to abide by the Code of Conduct for Parents and Spectators.
- If in the course of training, playing, or travelling to or from matches, or on approved tours with the age group, my child sustains an injury, I agree that any necessary First-Aid, medical and or dental treatment may be given to him or her in my absence, including the administration of a general anaesthetic and surgical operations in the case of an emergency, in accordance with the recommendations of a qualified medical practitioner.
- I give permission for photographs of my child to be taken, whilst participating in the activities of the Mini-Junior Section.

Signed (Parent/Guardian)

Date

FEES: Under 7 & 8 £40 - All other age groups £50 **NO SIBLING DISCOUNTS**

(Cheques made payable to "WRFC M/J Section". Please put the members name on the reverse of the cheque)

DATA PROTECTION: The personal information on this application form will not be made available to anyone outside the RFU, nor for purposes unconnected with WRFC

RUGBY FOOTBALL UNION

YOUNG PLAYER REGISTRATION FORM

RFU Registration Number (if known)

This form should be completed for all players within the club who have **NOT** previously registered with the **RFU**, are re-registering or have data amendments.

Please complete each section in **BLOCK CAPITALS** and return to your Club Registration Officer along with **TWO** passport size photographs. Please tick where appropriate **New Registration** **Re-registration** **Data Amendment** **Club Transfer**

First Names:		Surname:		D.O.B.:	
Home Address:					
Postcode:					
Male/Female		Home Tel:		Mobile Tel:	
Email address:					
Ethnic Origin (Please tick (✓) where appropriate):-					
<input type="checkbox"/> White: British	<input type="checkbox"/> Mixed: White & Black Caribbean	<input type="checkbox"/> Asian and Asian British: Indian	<input type="checkbox"/> Black or Black British: Caribbean		
<input type="checkbox"/> White: Irish	<input type="checkbox"/> Mixed: White & Black African	<input type="checkbox"/> Asian and Asian British: Pakistan	<input type="checkbox"/> Black or Black British: Africa		
<input type="checkbox"/> White: Other	<input type="checkbox"/> Mixed: White & Asian	<input type="checkbox"/> Asian and Asian British: Bangladesh	<input type="checkbox"/> Black or Black British: Other		
<input type="checkbox"/> Chinese	<input type="checkbox"/> Mixed: Other	<input type="checkbox"/> Asian and Asian British: Other	<input type="checkbox"/> Other Ethnic Group		
Previous Rugby Club (if any)		Representative Playing History (please give dates etc., using a separate sheet if necessary)			
Playing Position: <input type="checkbox"/> Unspecified <input type="checkbox"/> Front Row <input type="checkbox"/> Forward <input type="checkbox"/> Back		Plays at school: <input type="checkbox"/> Yes <input type="checkbox"/> No			
Medical Conditions/allergies (Asthma, Epilepsy, Allergic to penicillin) Please give full details using separate sheet if necessary: (Completing this section is not obligatory but the RFU in the interests of child safety strongly recommend that you do so).					
Name of Parent/Guardian:-				D.O.B.:	
Address of Parent/Guardian (if different from above):					
Postcode:					
Contact Telephone Number:			Email address:		
School/Education Establishment Name and Address:					
Contact Number:			Postcode:		
DATA PROTECTION					
The RFU is fully aware that some people will only want to receive information from the RFU on rugby issues and, therefore, you can ensure that you only receive this type of information by ticking the appropriate boxes below. However, some people will want to receive other information and, therefore, there are three options set out below.					
If you do or do not wish to receive certain types of data, you should tick the appropriate box below; the RFU may also use such personal data for the following purposes:					
<ul style="list-style-type: none"> • to send you by electronic mail (including email, SMS or image messages, etc) other information about RFU tickets, products, special offers, opportunities and related service which may be of interest to you e.g. TEL, RFU Travel, The Rugby Store etc. Tick here if you do not want to receive such information <input type="checkbox"/> • to pass your details to our official sponsors, who may use them now or in the future and to keep you informed by post of their products and services and to compile market research information and statistics, e.g. Nike, O2, Ford, etc. Tick here if you do not wish to receive such information <input type="checkbox"/> • to send you by electronic mail (including email, SMS or image messages, etc) information about our official sponsors, their associated companies and their products and services which may be of interest to you. Tick here if you do wish to receive such information <input type="checkbox"/> 					
I declare that the above is correct. In signing this form I agree that the above named player can be bound by the laws and resolutions of the Rugby Football Union and its constituent body and the rules of:					
..... Rugby Football Club					
PLEASE STATE CURRENT CLUB					
Signed (player):			Date:		
Signed (parent / guardian):			Date:		
Countersigned (Club Official):			Date:		