**Player Registration Form**

This form should be completed by the Parent / Legal Guardian of all children who wish to join any AFC Tattenhall Junior football team which compete in one of the Cheshire FA affiliated leagues.

Details supplied within this form are subject to data protection and held by AFC Tattenhall and Sports & Leisure Tattenhall solely for the administration of the clubs and their members. The information will not be shared outside of the clubs.

Send completed forms to: [afctattenhall.secretary@sporttattenhall.co.uk](mailto:afctattenhall.secretary@sporttattenhall.co.uk)

**Player Details**

|  |  |  |  |
| --- | --- | --- | --- |
| **Age Group** **(please select):**  U5  U6  U7  U8  U9  U10  U11  U12 | | | |
| **Players Name:** |  | **Date of Birth:** |  |
| **Parent/Guardian Name:** |  | **Telephone No:** |  |
| **Email:** |  | | |
| **Address:** |  | | |
| **Postcode:** |  | **Insert players photo here:** | |
| **Allergies/Medical Conditions:** |  |
| **Emergency Contact No:** |  |
| **Other relevant information:** |  |

**Volunteering**

AFC Tattenhall is run by volunteers, without these the club ceases to exist. There are a variety of roles that are required both at a team and club level. The majority of these do not require a footballing skillset.

If you are interested in how you can help please select the check box.

**Declaration**

I confirm that the details supplied above are correct and agree to abide by the rules as laid down by the FA and the relevant league the team is registered with.

I confirm that I understand the conditions of my registration.

I do / do not give permission for the representatives of AFC Tattenhall to photograph/video our child and understand that such images may be used in the online and offline media. Individuals will not be personally identified within the images / media.

We understand that if a player is found guilty of misconduct the Cheshire County FA may impose a fine and/or suspensions on that player.

I give permission for a Club or League official to administer first aid to my child should the need arise.

By registering the above child in the club and as such any relevant league you agree to abide by the codes of conduct of the league and its rules and regulations.

|  |  |  |  |
| --- | --- | --- | --- |
| **Print Name:** |  | **Date:** |  |
| **Parent/Legal Guardian’s Signature:** |  | | |