

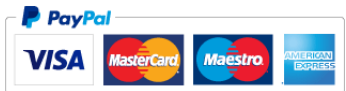




MEMBERSHIP FORM

SEASON 2023/24

[ONCE COMPLETED RETURN TO COACH]

Player Details			
Player's Name			
Date of Birth		Team / Age Group	
Home Address			
Current School			
Medical Conditions / Medications			
Parent / Guardian			
Name(s)			
Email Addresses			
Contact Telephone Numbers			
Photo Consent	I / We consent to photographs being taken of my/our child and for them to be used on the GCJFC club website or GCJFC social media with no names attached. <input type="checkbox"/> Yes <input type="checkbox"/> No (Please tick appropriate box)		
Membership Fee			
			
		<p>*Players with an older sibling that pay standard membership or have joined after 31st Dec 2023 are eligible for the discounted membership rate.</p> 	
Payment is accepted online via our membership pages www.membership.gardencityjfc.com Membership should be paid by October 1 st .			
Declaration			
<p>I / We consent to any emergency treatment necessary during football. I / We authorise the managers to sign any written form of consent required by the hospital authorities, if the delay in getting my/our signature is considered by the Doctor to endanger my child's health and safety.</p> <ol style="list-style-type: none"> I confirm that my child is not currently under suspension. Both my child and I agree to abide by the FAW Code of Conduct. I understand that personal insurance for my child is my responsibility. I indemnify my child's club and its members, the league and its members against any claims for accident or injury my child may occur whilst taking part in matches or training sessions. Medical conditions my child suffers from and noted above do not prevent my child from playing association football. I agree to return playing kit if he/she leaves the club 			
Parent/Guardian Signature		Date	