



Battersea Ironsides Minis RFC

Openview, Wandsworth, London SW17 0AW

Club Membership, Medical & Permission Form 2009/2010		
This form is submitted with the RFU young player registration form		
Name:		DOB
Siblings in other age groups:	Forename/s	Year Grp/s

Medical Permission
Do you permit trained BIRFC staff to render basic treatment to your child including assisting to administer 'own property' drugs and basic life support, first aid etc? Please delete: YES or NO

Parent/Guardian Details (IMPORTANT - Please fill in ALL DETAILS)		
	Father	Mother
Name:		
Alternate Address:		
Home Tel:		
Mob Tel:		
Email:		
Works for/at		
Job Role:		

I agree and accept that:	
<ul style="list-style-type: none"> • Photographic images may be taken of my son/daughter, during the normal course of rugby activity, by accredited press photographers and/or other parents. • The images may be used in the local press or in club publicity, in line with RFU guidelines on page 36 of Policy and Procedures for the welfare of young people in Rugby Union. • under guidance from the Rugby Football Union, the Club cannot take responsibility for child whose parent or guardian leaves them during training or matches 	
Parent/Guardian Signature:	Date:

- ✓ Annual membership £85 for first child plus £65 for each subsequent child
- ✓ Cheques made payable to Battersea Ironsides Minis RFC
- ✓ Submit two passport photos with your RFU Registration (see next page)
- ✓ Check carefully which year group your child is in – Under nn on last 31st August
- ✓ Write child name on back of photos
- ✓ If you submit a cheque for more than one child, write on both child forms which year group manager the cheque was submitted to
- ✓ Write on the back of the cheque which children/years it is for

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 <input checked="" type="checkbox"/> 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		
<p>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.</p> <p>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:</p> <ul style="list-style-type: none"> • 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"/> • 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"/> 		
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:		
Battersea Ironsides Minis		Rugby Football Club
<small>PLEASE STATE CURRENT CLUB</small>		
Signed (player):		Date:
Signed (parent / guardian):		Date:
Countersigned (Club Official):		Date: