



# Club Annual Membership & Consent Form

**This form should be completed by the parent/carer & child at the start of each season. Parents/carers are responsible for informing the club of any changes, as they occur.**

Name of child: \_\_\_\_\_

Age at start of season: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Primary Parent/carer's name: \_\_\_\_\_

Address: \_\_\_\_\_

Mobile: \_\_\_\_\_ Home: \_\_\_\_\_

Email: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Secondary Parent/carer's name: \_\_\_\_\_

Address: \_\_\_\_\_

Mobile: \_\_\_\_\_ Home: \_\_\_\_\_

Email: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

**It is important that you fill in the rest of this form as fully as possible. Failure to tell us things could mean that the safety and welfare of your child is compromised.**



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## HEALTH NEEDS

I agree to the club holding the health, medical and/or medication data I have provided below to ensure my child's safety and to take appropriate action to ensure their wellbeing (tick box to agree, leave black to disagree). I understand that I can withdraw my consent at any time, though this may result in my child being unable to participate in the club's activities.

## HEALTH

Does your child have any known health needs? E.g. Diabetes, asthma, epilepsy, allergies (tick as applicable):

Yes       No

*If yes, please complete the sections below.*

## CURRENT MEDICATION

Name: \_\_\_\_\_

Dose: \_\_\_\_\_

Frequency: \_\_\_\_\_

What does the club need to do to help keep your child well e.g. administer planned medications/call ambulance/give snacks? **Please be very specific.**

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Do club officials need any medical training other than First Aid to care for your child? **If yes, please specify.**

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Does your child any access needs? **If yes, please tell us what we need to do to help him/her.**

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## COMMUNICATION

Does your child have any communication needs e.g. non-English speaker/hearing impairment/sign language/dyslexia? **If yes, please tell us what we need to do to enable him/her to communicate with us.**

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## IMAGES/FOOTAGE

At times throughout the season the club may wish to take photos or videos of the team or individuals in it. We adhere to The FA Guidelines to ensure these are safe and respectful and used solely for the purposes for which they are intended, which is the promotion and celebration of activities of the club and for training purposes.

I confirm that my child is not subject to any family, care or legal proceedings which would impact the ability of the club to take photos or videos of my child and, if photos or videos were taken, that would not adversely affect the safety of my child.

I agree to the club being able to take photos and videos during the season of my child. I understand that I can withdraw my consent for this at any time during the season by notifying the club.

## GENERAL DATA PROTECTION REGULATIONS (GDPR)

For detailed information on the responsibilities of the club in respect of your personal data please refer to the Data Protection Policy and Privacy Notice. These can be found at: [www.leekwoottonfc.com/policies-guidelines](http://www.leekwoottonfc.com/policies-guidelines)

## SAFEGUARDING

Leek Wootton Junior Football Club aspires to provide an environment which is safe and enjoyable for every child in the Club. LWJFC supports and complies with the FA Respect and Safeguarding Best Practice Guidelines.



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If any parent/carer or player have any welfare concerns throughout the season, they can raise these with their coach(es) or directly with the club's Child Welfare Officers. Contact details can be found out at: <http://www.leekwoottonfc.com/about-lwfc>

## PERMISSION OF PARENT/CARER

I give permission for my child to participate in Leek Wootton Junior Football Club's events and agree to the conditions outlined above. I also agree that I, and all other supporters of my child, agree to abide by the club's Code of Conduct, which can be found at:  
[www.leekwoottonfc.com/policies-guidelines](http://www.leekwoottonfc.com/policies-guidelines)

I accept that it is my responsibility to inform the club directly of any changes to the details recorded on this form.

Signed by parent/carer: \_\_\_\_\_

Name of parent/carer (please print): \_\_\_\_\_

Date: \_\_\_\_\_

## PLAYER'S AGREEMENT

I will take part in Leek Wootton Junior Football Club's activities as detailed in this form and agree to adhere to the club's rules and the club's Code of Conduct, which can be found at:  
[www.leekwoottonfc.com/policies-guidelines](http://www.leekwoottonfc.com/policies-guidelines)

I will tell the coach or another person if I do not feel well or if I have any worries.

Signed by player: \_\_\_\_\_