

HOUGHTON ATHLETIC F.C.
PLAYER REGISTRATION FORM



Please complete both pages of this form

Player Details

Full Name _____

Home Address _____

Post Code _____

Home Tel No (inc code) _____

Date of Birth _____

Players Consent

I agree to be bound by, and observe the club rules/code of conduct. I also agree to abide by the rules and regulations of the Football Association and County Football Association, and any event in which the club participates.

Print Name _____

Sign Name _____

Date _____

Medical Details

Please indicate if you have any medical conditions we should be aware of, e.g. asthma

In the event that my child is injured whilst playing/training or travelling to/from games, and an emergency contact cannot be reached, I give consent for my child to receive medical attention.

Print Name (parent/guardian) _____

Sign Name _____

Date _____

Emergency Contact Information (Primary Contact)

Full Name _____
Home Address _____

Post Code _____
Emergency Tel No (inc code) _____

Emergency Contact Information (Secondary Contact)

Full Name _____
Home Address _____

Post Code _____
Emergency Tel No (inc code) _____

Registration Consent

Players are now registered using an FA website. For registration purposes, a player must have a FAN (FA Number). If one already exists, the club will use this number. If not, a new one must be created. To create a new FAN, the club must have an email address and permission from the player (if over 16) or email address and permission from the parent/guardian (if under 16).

I give permission for Houghton Athletic FC to create a new FAN if one does not already exist. YES / NO (please delete as appropriate).

Enter email address of player if over 16 or email address of parent/guardian if player is under 16

Email Address _____

Video and Still Photography Consent

I agree/disagree to give consent for my child to be videoed or photographed by Houghton Athletic for training/team memorabilia purposes.

Print Name (parent/guardian) _____
Sign Name _____
Date _____

Travelling Consent

In the event that I am unable to provide transport for my child to/from home/away games, I agree/disagree to give my consent for my child to travel with parents of other players.

Print Name (parent/guardian) _____
Sign Name _____
Date _____