

## JUNIOR PLAYER

## Membership Form 2023-24

Please compl	ete, or check and amend,	these details					
Nickname			First Name				
Building Name			Last Name				
Address					Date of birth		
Town		Postcode					
Home Phone							
	Name		Name				
Parents	Phone		Phone				
	Email		Email				
	Date of birth		Date of bi	rth			
Consent to treatment on pitch?	YES / NO	Allow data usage?	YES / NO	Picture co	onsent ?	YES / NO	
Relevant medical conditions?							

## PTO FOR ADDITIONAL INFORMATION AND PARENTAL / GUARDIAN APPROVALS

PAYMENT OPTIONS					
Under 7–18 age group	<mark>s inclusive</mark>	I <sup>st</sup> Child £110 (includes £30 club membership)  2 <sup>nd</sup> or other Child £100 (includes £30 club membership)			
Payment in full due 1/9/23 (circle amount paid) £110 / £100		Paid on :	1	/	By CASH / CHEQUE / BACS / CARD
Instalment I due I/9/23 - (Ist child) - (Sibling) Instalment 2 due I/I/24 - (all)	£75 £65 £35	Paid on :	1	/	By CASH / CHEQUE / BACS / CARD
Under 6s due 1/9/23	£60	Paid on :	1	/	By CASH / CHEQUE / BACS / CARD
Playing members who do not pay on the due date may not be allowed to train or play					

Office use only	Payment received by office	
	Payment logged in accounts	
	GMS Updated	

DATA PROTECTION / GDPR
The Club will retain and use your personal data and that of your child (including potentially sensitive data) for the purpose of participation in rugby, facilitating membership and use of the Club facilities, for regulatory reasons and to send you information about Club activities from time to time by post or via email. Your email address will not be given to anybody other than for one of the above purposes. Email will be the Club's primary method of communication this season - please ensure you provide us with a regularly used email address.
Please tick here $\Box$ if you do not wish your information to be used for these purposes (excludes child protection matters).
PARENTAL / GUARDIAN DECLARATION
I CONFIRM that the information contained in this form is true to the best of my knowledge and belief and that

I have the authority to give the necessary consents where appropriate.

I UNDERSTAND that as a member of the Club my child is subject to the Club rules and codes of conduct as well as the RFU rules and regulations appropriate to their age group and that any breach of these will be dealt with in accordance with the disciplinary procedures laid down by the Club and the RFU.

I UNDERSTAND that as a parent I am automatically an 'associate member' of the Club and I AGREE to abide by the RFU and Club rules, regulations and codes of conduct and agree to ensure my child is aware of their obligations under the rules, regulations and codes of conduct.

**I UNDERSTAND** that where I have given my consent to my child receiving emergency medical treatment and the taking/use of photographic images of my child for promotional purposes, withdrawal of that consent must be given in writing to the Safeguarding Officer with 7 days' notice.

given in writing to the Safeguarding Officer with 7 days' notice.
PARENT/GUARDIAN'S FULL NAME
(please print)
SIGNED DATED

## **Details for payment by BACS:**

A/C Driffield RUFC Ltd Sort Code 40-10-12 A/C No 61588303 Ref: Subs Lastname Firstname