

## EMERGENCY CONTACT DETAILS

Name: .....

Tel numbers .....

Address: .....

.....

## MEDICAL AUTHORISATION

Signing this form authorises team coaches and/or their assistants to sign on your behalf any papers needed by the medical authorities, at times when you cannot be contacted or be present, in case of medical treatment being required, while your son, daughter or other child in your care is training or playing competitive rugby for B&ARFC. This form must be completed for all players prior to training or matches.

He/She has not, any known allergies or sensitivities, eg penicillin or plaster allergies etc, or asthma or other disabilities. Please give full details of any treatment and/or precautions, and any details of known conditions that may need to be known by the medical authorities prior to or during treatment of the above named player. Continue on a separate sheet if necessary.

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Please provide the following information if known:

NHS no..... Religion..... Blood group.....

Name and address of family doctor / surgery:

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### BARFC USE ONLY:

Monies Received: £ \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

By (signature): \_\_\_\_\_ Print: \_\_\_\_\_

Subsidised shirt received: Y/N

Voucher Issued: Y/N Voucher Number: \_\_\_\_\_

## PARENTAL CONSENTS

As Parent/Guardian/Carer of the above Bridgwater and Albion RFC Player I confirm that I have received, read and understand the Youth Rugby Information Pack.

In particular I confirm that I have read and agree with (please tick):

- Photography Policy
- Child Welfare & Safety Policy
- Parents Code
- Spectators Code

I also confirm that my child named above is not the subject of any court order.

I acknowledge that if I later change my mind on any of the above policies that I can withdraw my permission at any time by informing the Team Manager in writing.

I confirm that I have received the £10 Hooks voucher (**only** if my child is a new member for 2015/16) and that I understand this can only be used for the discounted purchase of a shirt/tie set for the aforementioned child.

Signed (Parent): .....

Print Name: (Parent): .....

Date: .....

**Please return this form completed in full to your child's team manager with payment of appropriate fee.**

**Please also ensure that you complete the RFU Young Player Registration Form and return to your Team Manager.**



## CHILD CONSENTS

As a player for the Bridgwater & Albion RFC Youth Section, I confirm that I am playing because I wish to play, not just to please parents or coaches.

I also confirm that I have read, understood and agree to abide by the Players Code.

### Player's Code

Young players should recognise that many people in Rugby Union are working to provide a safe and enjoyable game in which they can develop both as a player and as an individual.

#### **In Rugby Union, as a young player you should:**

- Play because you want to do so, not to please coaches or parents
- Remember skill development, fun and enjoyment are the most important parts of the game.
- Be attentive at all training/coaching sessions.
- Work equally hard for yourself and your team and both will then benefit.
- Recognise good play by **ALL** players on your team and by your opponents
- Be a sportsman – win or lose
- Play to the laws of the game and accept, without question, all the referee's decisions.
- Control your emotions. Verbal or physical abuse of team-mates, opponents, or match officials **IS NOT ACCEPTABLE**.
- Treat all players, as you would like to be treated. Do not interfere with, bully or take unfair advantage of any player.

#### **In Rugby Union, Young players are encouraged to:**

- Recognise and appreciate the efforts made by coaches, parents, match officials and administrators in providing them with the opportunity to ply the game and enjoy the rugby environment.
- Understand the values of loyalty and commitment to adults and team-mates.
- Recognise that every young player has a right to expect their involvements in rugby to be safe and free from all types of abuse.
- Understand that if an individual or group of young players feel that they are not being treated in an acceptable manner, then they have a right to tell an adult at the rugby club or outside of the game.

If at any time I have any questions about this code or anything to do with the game of Rugby I can speak to the Coach or Team Manager.

Signed (Child): .....

Print Name: (Child): .....

Date: .....



# BRIDGWATER & ALBION RUGBY FOOTBALL CLUB

## 2015/2016

## YOUTH RUGBY MEMBERSHIP FORM

To play for Bridgwater and Albion RFC Youth Rugby this form must be completed and given to your Team Manager, who will pass it to the membership secretary. One form per player is required, together with the relevant membership fee.

Player Name: .....

Parent/Guardian Name: .....

Full Address: .....

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..... Postcode: .....

\*Tel No: .....

\*Mobile: .....

\*Email .....

Age: ..... DOB: .....

**\*Please do try and provide these details as your Team Manager & the Youth Section will use this to contact you with important updates. These should be PARENTS contact details, not the child's.**

Membership fee for the Youth section is £35 for the first child and £20 for each brother or sister. Family membership is £60 for one adult and one youth membership. Fee includes use of club facilities, insurance cover, match fees and home game hospitality.

- Family Membership Paid - £60.00 (please also complete adult form)
- Full Fee Paid - £35.00
- Sibling Fee Paid - £20.00

*Sibling Name* (if applicable): .....