

FRIDAY NIGHT FOOTBALL



SAINTS
FOUNDATION

WRIGHT
SPORTS

EASTLEIGH
BOROUGH COUNCIL

Registration and parental consent form

Participant details

First name:

Last name:

Date of birth:

Address:

Post code:

Contact email:

Gender: Male Female

Please give details of any medical conditions and/or medication taken:

Do you have a disability: Yes No

If yes, please inform us of the nature of the disability and any support required:

Emergency name:

Emergency telephone number:

In the past week, how many days have you engaged in at least 60 minutes of physical activity (including activity within education), please tick:

0 1 2 3

4 5 6 7

Which facility will you be attending?

Botley Recreation Ground

Hamble Sports Complex

Places Leisure Eastleigh

Terms and conditions

(please read carefully)

I acknowledge that all participants will be responsible for making their own way to and from the playing venue.

If any emergency medical treatment becomes necessary, I authorise the coach to act as required, including signing a consent form on my behalf if needed by the medical authorities.

I acknowledge that the Friday Night Football staff are responsible for participants only whilst they are attending the session. They are free to come and go as they please during the sessions and staff cannot be held responsible for their welfare once they have left the site.

I acknowledge and accept that Friday Night Football staff and volunteers shall not have any liability in respect of any loss or damage to persons or property whilst in attendance of Friday night Football activities.

Behaviour must be respectful to all other players and coaches.

We may take photos/videos of sessions for publicity and promotional purposes (including digital/online and print e.g. website, social media, news media, advertising materials). They will be stored in accordance with GDPR and may be used up to six years from today.

I understand and give my informed image consent for this child, please tick here

Eastleigh Borough Council is committed to your privacy. We will use the information on this form for the purposes of administrating the Friday Night Football project. Please refer to our full Privacy Note at eastleigh.gov.uk/privacy, service area: Sport & Active Lifestyles.

I

(Parent/Carer's full name) confirm I have read and agree to the terms and conditions above, and agree to my son/daughter named taking part in Friday Night Football.

Signature

Date