

St Mirren Youth Football Club (Scottish Registered Charity # SC041082)
Parental Consent Form / Player Registration Form / Pre-Signing Agreement

Player Personal Details			
Full Name:			
Date Of Birth:		Place of Birth:	
Current Address:			
Place / Town:			
Post Code:		Home Phone #:	
Mum's Name & Mobile #:		Dad's Name & Mobile #:	
eMail address:			

Club Details PLEASE TAKE A NOTE OF THE INFORMATION BELOW FOR YOUR OWN FUTURE USE

Visit the Club web service for more information on: <http://stmirrenyfc.org.uk>
Please register for Club updates on <https://stmirrenyfc.teamapp.com/> via your 'phone & online

Player Medical Details			
Doctor's Name:		Doctor's #:	
Doctor's Address:			
Medical History: Please provide details of any conditions, medication, allergies or dietary requirements			

Alternative / Emergency Contact Details:

Contact Name:		Relation/Relative:	
Contact Home #:		Contact Mobile #:	

Declarations: to be completed by PARENT or LEGAL GUARDIAN only.

I, being the Parent / Legal Guardian of Player give / do not give my consent for the player to travel with **St Mirren Youth Football Club** on any authorised Club Activities as and when selected.

I, being the Parent / Legal Guardian of Player give / do not give permission to the relevant official of **St Mirren Youth Football Club** to make such emergency decisions as necessary with regard to the treatment of any medical condition or injury received during any activity until such times as I can be contacted. I authorize / do not authorize, them to sign any medical documents necessary for the emergency treatment of the player should the need arise.

I, being the Parent / Legal Guardian of Player give / do not give my permission for my child to have HIS/HER photograph taken as part of any individual or team photographs and for these photographs to be used and reproduced by **St Mirren Youth Football Club** in such a manner, as they deem appropriate. Usage will be in line with any guidelines within the SYFA Player and Official Protection Policy or policy of the Scottish Football Association

PARENT or LEGAL GUARDIAN'S SIGNATURE

PRINT NAME..... DATE SIGNED.....

Please return this completed form to your Coach as soon as possible!