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| Adrenalin  Devon Junior & Minor league |
| Club Player Registration |
| Season 2020 - 2021 |



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| Player Fan Number: | |  | DJML Form 5 |
| Club Name: | Team Age Group: | |  |

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| **A copy of this form must be available at all matches and training sessions in which the registered person is taking part** |

All Clubs and their teams shall support the FA Respect Programme. A respect League its Clubs and Teams seek to play all their fixtures in a fair, competitive but not antagonistic environment. Everyone has a collective responsibility to create a fair, safe and enjoyable environment in which all games may take place.

Every playing member of a member club must fully complete and sign a Player Registration Application Form binding him or her to play for that particular Club for which they sign. **Forms are obtained from League Officer or Online and must be Inputed on to the Whole game (WGS) registration system by club official**). No player registered with a FA Premier League or Football League Academy will be permitted to play in this League. No player registered from U11 – U16 with a centre of Excellence may play in this League\* (\* Subject to permission the FA Regulations of the Program for Excellence, Para 9 Centres of Football Category a; b; c)

**Forms must be fully completed, and details updated onto WGS – registrations are valid for one season only**

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| **Players Details**: Full Name: | | | Male / Female (Delete) |
| Players Date of Birth: | School College: | | |
| Player Full Address: | | School Year (September): | |
|  | | Telephone Contact: | |
| Postcode: | | Player Signature: | |

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| **Medical Details:** (Please indicate if you have any serious medical conditions we should be aware of): |
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| Full Name: | Parent Signature: |
| Email Address: | Parent DOB: |
| Landline Number: | Telephone Number: |

**Parent / Carer Emergency Details:**

**2nd Emergency Contact:** (in the event the above person cannot be contacted)

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| Full Name: | Telephone Number: |
|  | Mobile Number: |

I agree to the above named person being registered as a playing member of the named football club and confirm the date of birth given is true. Providing a false date of birth is considered a serious offence. **I confirm that he / she is not currently registered with a Centre of Excellence**. In the event that the above-named person is injured whilst playing football / travelling to and from football events and I am not present in person or cannot be contacted on the above number(s), I hereby give my consent for this person to receive medical attention from a responsible adult (in the case of a girl, by another female adult) who will provide the necessary care and where required will supervise emergency aid on or off the field of play.