

SEASON 2024/25 PLAYER'S REGISTRATION & LIABILITY DECLARATION FORM

PLAYER NAME (IN FULL)					
ADDRESS					
CONTACT NUMBER/S					
EMAIL (PRINT CLEARLY - CASE SENSITIVE)					
NAME OF SCHOOL ATTENDED					
AGE AT DATE OF SIGNING (YEARS/MONTHS)		YEARS	MONTHS	D.O.B.	
TEAM REGISTERED FOR (IE. U8'S)					
PREVIOUS CLUB				SEASON	
COUNTRY (IF NOT ENGLAND)					
DOCTOR'S NAME					
SURGERY ADDRESS					
SURGERY TELEPHONE N	UMBER				
ANY KNOWN MEDICAL	CONDITIONS				
PRESCRIBED MEDICATIO	N OR DRUGS				
I confirm that	the details I have give	en above to be correct	and that I wish	to be registered as a	
pl	aying member of Broi	msgrove Rovers AFC fo	or the 2023/24	Season.	
I have received my C	Code of Conduct and	agree to abide by the o	conditions of Tl	he FA Respect Programme.	
PLAYERS SIGNATURE					
PRINT				DATE:	
I confirm that all the above information is correct and I give my consent for the above named player to play for BROMSGROVE ROVERS AFC . I accept that no liability will rest with the Club or it's Personnel whilst the player is engaged in playing or training with the Club. Signing on fee of £10.00 enclosed with Registration Form.					
I have received my C	Code of Conduct and	agree to abide by the o	conditions of Tl	ne FA Respect Programme.	
SIGNED (PARENT/GUARDIAN)					
PRINT				DATE:	
I have witnessed the signature of the Player to this form and I certify that I am satisfied that the Date of Birth given is correct.					
SIGNED					
CLUB SECRETARY				DATE:	



SEASON 2024/25 PLAYER'S MEDICAL CONSENT FORM

PLAYER NAME (IN FULL)					
ADDRESS					
CONTACT NUMBER/S					
DOCTOR'S NAME					
SURGERY ADDRESS					
SURGERY TELEPHONE NUMBER					
ANY KNOWN MEDICAL CONDITIONS					
PRESCRIBED MEDICATION OR DRUGS					
I agree to my Son/Daughter receiving medication as instructed and any emergency dental, medical or surgical treatment, including anaesthetic or blood transfusion, as considered necessary by the medical authorities present. I understand the limitations of the insurance cover provided.					
SIGNED (PARENT/GUARDIAN)					
PRINT			DATE:		
BROMSGROVE ROVERS AFC FOOTBALL CLUB will, at times, take photographs to be used to publicise The Club - in accordance with FA Recommendations. At no time will any child be named. These pictures may be posted on Facebook or used in the local press. Please indicate below whether you consent to your child's photo being published. PLEASE NOTE: The Club cannot be held responsible for postings made by individuals on any Social Media Sites. FA guidelines prohibit the publication of scores for ANY game up to and including Under 11 in any format.					
I	consent/object to my child's photo being published (CIRCLE AS APPLICABLE)				
SIGNED (PARENT/GUARDIAN)					
PRINT			DATE:		

TERMS & CONDITIONS OF REGISTRATION

I understand that all kit and equipment supplied to my child by **BROMSGROVE ROVERS AFC** (The Club) remains the property of the club and should only be used for the purposes supplied. Should your child leave for whatever reason you should make arrangements for the immediate return of any kit/equipment held. Should you fail to do so the club reserves the right to invoice you for the cost of replacement items and recover any costs involved in collecting payments. Further you are cordially reminded that all coaches and committee members are unpaid volunteers who give their time for free.

Football is a game of opinions and you may not always agree with the decisions of the team Manager/Coach. In this instance your complaint should be raised with a member of the Management Committee (Chairman / Secretary / Welfare Officer) who will investigate and report back to you. On occasion this may necessitate seeking advice from the County FA.

At no point should Parents / Players resort to making personal remarks aimed at (Coaches / Managers / Committee Members) either on social media or by text / email. The club will reserve the right to cancel the registration of your child should this become an issue. Your completion of the Club Registration Form confirms your acceptance of these terms and conditions.



SEASON 2024/25 REGISTRATION FEE & INFORMATION

PLAYER NAME (IN FULL)					
TEAM REGISTERED FOR (IE. U8'S)					
I agree to pay a Registration Fee of £10.00 made payable to Bromsgrove Rovers AFC . If paying via BACS, please put Players Name as the reference.					
ACC. NAME (NOT A BUSINESS ACCOUNT)					
SORT CODE	30-98-97				
ACCOUNT NUMBER	62415162				
SIGNED (PARENT/GUARDIAN)					
PRINT			DATE:		