Alyth Belsize Football Club
Player Registration: Season 2020-21

PLAYER'S NAME: .....

DATE OF BIRTH:.....

TEAM: *(circle team)* **U10** **U11** **U15 (BLACK)**

If you are transferring team, please indicate previous team: .....

School attended .....

Synagogue membership .....

Kit ***Click here and complete the form***

PARENTS'/GUARDIANS' INFORMATION *(If same as last year please tick box and just complete name and email address)* ☐

Father – name..... **Mother – name** .....

Address .....

Postcode ..... **Home phone**.....

Mobile..... **Mobile** .....

E-mail ..... **E-mail**.....

PLAYER'S PERSONAL/MEDICAL INFORMATION

Do you have any allergies? *If 'yes' please provide info below* YES / NO

Are you still covered by a current tetanus injection? YES / NO

Do you wear contact lenses? YES / NO

I give my permission for ice/heat spray to be applied to my child if required in the event of a minor injury YES / NO

Do you suffer from: Hay Fever / Asthma / Diabetes / Heart Condition / Other

Additional medical information .....

Do you suffer from any behavioural or mental health issues? YES / NO

If 'yes' please contact Greg Blank, Club Chairman, to discuss in confidence

PERMISSIONS

Photographs – please tick to confirm that you are willing to allow your child to be photographed for the purposes of general publicity (club website, synagogue displays, press, etc). ☐

Travel arrangements are the responsibility of parents. Please tick to confirm you understand this. ☐

SIGNATURE OF PARENT OR GUARDIAN:.....

ANNUAL MEMBERSHIP FEE

PLEASE TRANSFER TO ALYTH BELSIZE FC, BARCLAYS BANK, SORT CODE 20-76-90 ACCOUNT NUMBER 93676498

Alyth or Belsize Square Synagogue members	**£345.00**
All others	**£360.00**

Please contact the Club for details of our sibling discount (if applicable)

Additionally, players will need to complete a Watford Friendly League registration form (to include 2 identical passport photos) and supply proof of DOB (last year's WFL card or copy of birth certificate/current passport). This will be given to you by your manager.

Please return this form + confirmation of payment + WFL form/envelope + proof of DOB to:

Greg Blank, Alyth Belsize FC, 2 Farnham Close, London N20 9PU

alythbelsizefc@aol.co.uk