



Players Name:
 School Year:
 Team: PB Crusaders: Under:

Potters Bar Crusaders Youth FC - MHRML Registration Checklist

- | | | tick / delete as appropriate |
|----------|--|---|
| 1 | Completed Mid Herts Rural Minor League Registration Form (Hard copy to be obtained from Team Manager) | <input type="checkbox"/> |
| 2 | Registered to this league last Season (<i>Team Manager to Attach Old Reg Card</i>) | Yes / No |
| 3 | <u>New Registration</u> Photocopy of Birth Certificate or Passport | if YES go to item 4 <input type="checkbox"/> <input type="checkbox"/> |
| 4 | Two Passport Size Photographs (cut to size and stick in spaces on Reg Form (item 1)) | <input type="checkbox"/> |
| 5 | Completed & Signed Code of Conduct & Parent Consent form. | <input type="checkbox"/> |
| 6 | Completed & Signed Parent Consent form for Digital Images & Video | <input type="checkbox"/> |
| 7 | Completed & Signed Membership Registration Form | <input type="checkbox"/> |
| 8 | Payment: (Cheques made payable to "Potters Bar Crusaders Football Club") Registration will not be processed without payment Cheque No: | |
| a | £120 Full Annual Payment. (<i>if received before 31st Aug - £130 if after 31st Aug</i>) | <input type="checkbox"/> |
| b | £80 - £50 Split Payment (£80 cheque for now with £50 post dated cheque for December 2007) | <input type="checkbox"/> |
| c | £80 Sibling payment (first child pays £120 any further children pay £80. Please provide first child's name and team) name: team: | <input type="checkbox"/> |
| d | Special arrangement (with copy of letter from Executive Committee) or Post Season Registrations. £ | <input type="checkbox"/> |

Note: Failure to complete and return all the above documents will delay the processing of the Players Registration and may incur fines to be levied by the league.

Please double check that all documentation is completed and payment is sent, if there are any queries on documents, please contact your Team Manager or contact the Registration Secretary.



Potters Bar Crusaders Youth FC
Code of Conduct Declaration & Parent Consent

Dear Parents / Guardians

The current Potters Bar Crusaders Youth FC Code of Conduct can be viewed in the Football Notice Board in the Clubhouse.

Could we ask each Parent/Guardian to read the Code of Conduct, discuss / explain to their Child/ren, complete the Declaration section below and return with Registration Pack.

Breach of Rules can result in Personal Fines or for more serious offences personal barring from all football grounds in the country.

Also below is the Parental Consent Form which needs to be filled in to ensure that the Team Managers, Coaches and Assistance have your permission for your Child to participate in Training and Matches.

Code of Conduct Declaration Form

I / We* the Parents / Guardians* of _____ have read and understood Potters Bar Crusader's 'Code of Conduct' and will undertake to ensure that our Child(ren) and ourselves will observe the points stated. (* Delete as Appropriate)

Team: _____ Age Group: under _____

Signed: _____ Date: _____

Full Name: (capitals): _____

.....

Parental Consent Form

Football Activity

Training / Match: From: *Sept 2007** To: *Sept 2008*

*Delete if joining through season, enter start date here: From: _____ 20_____

I agree to _____ taking part in the above activities.

I acknowledge the need for _____ to behave responsibly.

Signed: _____ Date: _____

Full Name: (capitals): _____



POTTERS BAR CRUSADERS YOUTH FC
MEMBERSHIP REGISTRATION FORM

Child's Full Name: _____

Home Address: _____

_____ Postcode: _____

Email Address: _____

Ethnic Origin: (Please Tick)

White

Chinese

Black African

Black Caribbean

Black Other

Pakistani

Indian

Other (Please Specify) _____

Education Details:

School: _____

Address: _____

County: _____ Postcode: _____

Current School Year: _____

Telephone Number: _____

Medical Details

Please indicate if your child has any medical conditions we should be aware of
e.g. asthma

Emergency Parent / Carer Details

Mr / Mrs / Miss / Ms (Please delete)

Full Name: _____

Emergency Telephone Number: _____

In the event that the above named person cannot be reached, please give an extra emergency contact name and number

Full Name: _____ Contact Number: _____

1. In the case of a medical emergency I agree that the Club's representative may take any appropriate decisions.
2. I agree to be bound by and to observe the Club rules and The Rules and Regulations of the Football Association, and all Competitions in which the Club participates.

Signature: _____ Date: _____

Full Name (in capitals) _____