



Players

Personal details



Please attach a recent passport size photograph of the player for a Bumble Bees RUFC ID card

Print the players name on the back of the photograph

Players RFU registration number _____

Player's surname _____

First name _____

Date of birth _____

Address _____

_____ Post code _____

Parent / Carers's name _____

Telephone: Mobile _____ Home _____

Emergency contact number(s) _____

E-mail address _____

Doctor _____

Surgery address _____

_____ Telephone _____

(Please turn over)

Medical Information

Does the player suffer from asthma, chest complaint, wheezing or breathlessness, first or fainting, diabetes, or any other illness, disability or disorder?

Yes / No If "Yes", please give details

Is the player allergic to anything you know of?

Yes / No If "Yes", please give details

Is the player receiving any form of medical treatment at the moment?

Yes / No If "Yes", please give details

Please notify your coach if the answer to any of the above questions changes during the course of the season.

Consent

Parent / Carer

I agree to the player in my care taking part in the activities of Bumble Bees RUFC.

I understand that I will be kept informed of these activities e.g. timing of sessions and transport details.

I have read and agree to abide by the parents / spectators Codes of Conduct.

I understand that, in the event of injury or illness, all reasonable steps will be taken to contact me using the contact details provided, and to deal with that injury / illness appropriately.

I hereby authorise any coach / first aider of Bumble Bees RUFC to sign on my behalf any papers required by the medical authorities in case of emergency medical treatments.

I consent / do not consent to the photographing / videoing and publication of images of the player in my care under the RFU's guidelines. I confirm that I am legally entitled to give this consent and that the player is not under a Court Order.

Signature _____ Relationship to player _____

Full name _____ Date _____

Player

I have read and agree to abide by the Players Codes of Conduct.

I consent / do not consent to the photographing / videoing and publication of images of my involvement in rugby union under the RFU's guidelines.

Signature _____ Date _____