

# Bonnyrigg Rose Community Football Club



## PLAYER REGISTRATION (U16'S)

Player Details			
Name		D.O.B	
Address		Town	
Post Code		Tel (Home)	
Email		School	

Emergency Contact Information			
Contact 1 Name		Tel 1	
Tel 2		Tel 3	
Contact 2 Name		Tel 1	
Tel 2		Tel 3	

Medical Information	
Details	

### Parental Consent

By returning this completed form I agree to the child named above taking part in the normal activities of the club. I have read the Code of Conduct for both players and parents/guardians and agree to abide by those whilst in the care of the club and I understand that any serious or continued breach of these codes may result in my child being expelled from the club.

Parent/Guardian Name:

Parent Guardian Signature:

Date:

### Photography

From time to time the club may wish to take pictures for promotional use in local, regional or national media to promote the work of the club. Any photographs taken will be used solely for promotional purposes. Please sign below to indicate your agreement for pictures to be taken for the above reasons.



Bonnyrigg Rose Community Football Club, Poltonhall Sports Complex, 7a Poltonhall Avenue Road,  
Bonnyrigg, EH19 2NU, Registered Charity SC050923

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Parent/Guardian Name:

Parent Guardian Signature:

Date: