



# Marshalls Football Club

## 2011-2012 Player Registration Form

### Player Information

Age group in 2011-2012: Under \_\_\_\_\_ Coach: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home telephone number: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Name of school attending in 2011-2012: \_\_\_\_\_

### Parent/guardian Information

Name: \_\_\_\_\_

Emergency telephone number: \_\_\_\_\_

Email for club correspondence: \_\_\_\_\_

Would your business like to support Marshalls FC by being a sponsor? Yes  No  N/A

Name of business: \_\_\_\_\_

Contact number: \_\_\_\_\_

### Medical Details

Does the player suffer from any medical condition(s) of which the coaching staff should be aware?

Yes  No  If YES, please give details: \_\_\_\_\_

\_\_\_\_\_

Is the player taking any medication(s) of which the coaching staff should be aware?

Yes  No  If YES, please give details: \_\_\_\_\_

\_\_\_\_\_

In the event of medical treatment being required, do you give your consent for the coaching staff to take the appropriate action? Yes  No

**Registration fee**

The club registration fee is £10 (cheques made payable to " Marshalls FC")

Enclosed

**Membership Fees & Payment Method**

8 monthly payments, from September 2011 to April 2012, of £15.

**Payment Method**

Standing order

Cash / Cheque (made payable to "Marshalls FC")

**Parental/Guardian Consents**

I, and the above named player, agree to abide by and respect Marshalls FC codes of conduct (a copy of which is available on our club website at [www.marshallsfc.co.uk](http://www.marshallsfc.co.uk)).

I confirm that all information on this form is correct.

I consent to the above named player participating fully in both training sessions and matches as a member of Marshalls FC.

I understand that it is my responsibility to provide whatever personal insurance cover for the player I feel is necessary.

I agree to pay the current club membership fee of **£10.00** (cheques made payable to "Marshalls FC") for the above named player.

Signed: \_\_\_\_\_ Please print name: \_\_\_\_\_ Date: \_\_\_\_\_

I give permission for photographs/videos of my child to be taken during practise and match sessions.

Signed: \_\_\_\_\_ Please print name: \_\_\_\_\_ Date: \_\_\_\_\_

**This form must be returned, together with the registration fee of £10 (cheques made payable to "Marshalls FC"), to your child's coach at the club Presentation Day on 22<sup>nd</sup> May 2011 or by post (c/o Liam Deveney, 55 Rosemont Road, Liverpool, L17 6BY) in order for your child to play. Any player not registered by 10<sup>th</sup> July 2011 will be not selected for next season.**



# Marshalls Football Club

## 2011-2012 Standing Order Mandate

Player's name: \_\_\_\_\_ Age Group in 2011-12: Under \_\_\_\_\_  
Coach: \_\_\_\_\_

To HSBC Bank Plc

I authorise my bank  
(please complete details of your bank)

Bank name: \_\_\_\_\_

Branch: \_\_\_\_\_

Address: \_\_\_\_\_

Sort code: \_\_\_\_\_

Account number: \_\_\_\_\_

Account name: \_\_\_\_\_

To pay reference Marshalls Football Club, beneficiary sort code 40-29-01, beneficiary account number 11448501, the sum of £15 (fifteen pounds) per month, 8 payments, starting from September 2011. Deductions to be made on the 1<sup>st</sup> of each calendar month.

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_

**Office use only**

Signature on behalf of Marshalls Football Club: \_\_\_\_\_

Date: \_\_\_\_\_

Reference No: \_\_\_\_\_

This form must be returned, together with the registration form and the registration fee of £10 (cheques made payable to "Marshalls FC"), to your child's coach at the club Presentation Day on 22<sup>nd</sup> May 2011, or by post (c/o Liam Deveney, 55 Rosemont Road, Liverpool, L17 6BY). Standing order mandate forms received after 10<sup>th</sup> July 2011 will not be processed.