



IRISH RUGBY FOOTBALL UNION

Adult Player Registration Form

PLEASE USE BLOCK CAPITALS ONLY

Club Name: _____ Season: _____ First Name: _____ Surname: _____

Maiden Name _____ Initials _____ Date of Birth (DD/MM/YYYY) _____ / _____ / _____

GENDER F M School Attended _____ Previous Club _____

Home address _____

Nationality _____ Country of Origin _____

Telephone Home _____ Mobile _____ Email _____ Next of Kin/Guardian: Name _____ Contact Tel No. _____

Data Protection

I understand that it is necessary for _____ (Insert Club Name) to collect and record the personal data on this form ("Personal Data") for the contractual purpose of registering and maintaining my membership with the Club. I understand that the Personal Data may be shared with Provincial Branches and the IRFU from time to time and that the Club, the Branch and the IRFU are all Data Controllers.

I understand that the Personal Data will be retained by _____ (Insert Club Name) for the duration of the membership and in line with the Club Retention Policy. I further understand that I have a number of rights around the processing of Personal Data, including the right to request in writing a copy of my Personal Data which the Club holds, amend any information which is incorrect and to apply to have my Personal Data erased. I can also confirm that I have been given the opportunity to consult further relevant information concerning my data protection rights at www.dataprotection.ie.

I am aware of all my Data Protection rights and have given my consent, by ticking the boxes and signing below, for my information to be used as follows:

(Please tick as appropriate)

I consent for the Club to contact me with updates regarding the Club and including but not limited to activities such as match details, fundraising, ticket sales, meetings and events.

I am aware that my photograph or video image may be taken whilst attending or participating in games or activities connected with the Club and I consent to it being used by the Club for match programmes, year books, match reports, event reports or on the Club website or social media channels.

I understand that I can withdraw my consent at any time by writing to the Club.

Signed: _____ Date: _____

Print Name: _____

Club Use only	IRFU ID No.....
Copy of Birth Cert	Signed Photos
Clubs are to return completed forms with the applicable fee to the Branch.	