

IRISH RUGBY FOOTBALL UNION

U18 Player Registration Form

To be completed for persons U18 years old and/or without capacity to give consent. PLEASE USE BLOCK CAPITALS ONLY

Club Name:	First Name:	Surname:		
Maiden Name	Initials	Date of Birth (DD/MM/YYYY)	/	/
GENDER F M School Attend	led	Previous Club		
Home address				
Nationality	Country of Origin _	Season	·	
Telephone Home	Mobile	Email		
Next of Kin/Guardian: Name		Contact Tel No		
Signed (Player): Data Protection	Pr	int Player Name:		
the personal data on this form Under 18 Player's membership Branches and the IRFU from the I understand that the Personal duration of the Under 18 Player I have a number of rights arou the Under 18 Player's Persona to have the Under 18 Player's consult further relevant inform	("Personal Data") for the o with the Club. I undersone to time and that the Data will be retained by er's membership and in I and the processing of Per I Data which the Club ho Personal Data erased. I contion concerning my da	(Insert Club National Structure) (Insert Club National Structure) (Insert Club National Structure) (Insert Club, the Branch and the IRFU a (Insert The Branch and the IRFU a (Insert The Club Retention Politics (Insert The Club Retenting)))))))))))))))))))))))))))))))))))	ering and i v be share re all Data (Insert Cl cy. I furth o request ich is inco n given th aprotection	maintaining the d with Provincial a Controllers. lub Name) for the er understand that in writing a copy of rrect and to apply e opportunity to on.ie
my information to be used as f		· · · · · · · · · · · · · · · · · · ·		

(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 the Player's 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 confirm I am the legal Parent/Guardian of the above-named player and can consent to the player participating in rugby activities in line with the IRFU's Safeguarding Policy, <u>http://www.irishrugby.ie/playingthegame/development/safeguarding/policy.php</u>

I acknowledge that the organisation is not responsible for complete supervision for the player except for formal coaching, matches and competitions.

I am aware the Codes of Conduct for Parents and Players and I have discussed the relevant code with the player. I will endeavour that they should abide by it, http://www.irishrugby.ie/playingthegame/development/safeguarding/parents-and-guardians.php

I have informed the club/related organisation of any necessary medical/behavioural information that allow club personnel to keep the player safe

I confirm I am happy with the travel arrangements that the organisation may have arranged for the player.

If selected on representative teams I am satisfied that the player will comply with the relevant anti-doping procedures.

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

Clubs are to return completed forms with the applicable fee to the Branch.

Signed:	Date:	
Print Name:		
Club Use only	IRFU ID No	
Club Use only Copy of Birth Cert	Signed Photos	