**JUNIOR REGISTRATION FORM**

**PERSONAL DETAILS – PLAYER**

|  |  |  |
| --- | --- | --- |
| Surname |  | |
| Given Names |  | |
| Date of Birth |  | |
| Sex (please circle) | Male | Female |
| Address |  | |
| Suburb: | Postcode: |
| Phone | Home: | Mobile\*: |

**\*Note: this should be the players’ own mobile number if applicable**

**PARENT/GUARDIAN**

**Email/texting are the fastest and most cost effective way to keeping you informed with events and information. Please ensure that you complete these sections on the form.**

**Parent / Guardian 1**

|  |  |
| --- | --- |
| Name: | |
| Address: | |
| Suburb: | Postcode: |
| Phone no. (Home): | Phone no. (Mob): |
| Email Address: | |
| Occupation: | |

**Please indicate your preferred contact method (please circle) mobile email**

**Parent / Guardian 2**

|  |  |
| --- | --- |
| Name: | |
| Address: | |
| Suburb: | Postcode: |
| Phone no. (Home): | Phone no. (Mob): |
| Email Address: | |
| Occupation: | |

**Please indicate your preferred contact method (please circle) mobile email**

**Sibling Details (please complete if applicable)**

|  |  |  |
| --- | --- | --- |
| Player 1 Name: |  | DOB: |
| Player 2 Name: |  | DOB: |
| Player 3 Name: |  | DOB: |
| Player 4 Name: |  | DOB: |

**EMERGENCY CONTACT DETAILS**

|  |  |  |  |
| --- | --- | --- | --- |
| Surname: | | | |
| Given Name: | | | |
| Address: | | | |
| Suburb: | | Postcode: | |
| Phone: | Home: | Business: | Mobile: |
| Relationship to player: | | | |

**HEALTH CARE DETAILS**

|  |  |  |  |
| --- | --- | --- | --- |
| Medicare Number: |  | | |
| Private Health Insurance: | YES | NO | Fund: |

**DOCTOR DETAILS**

|  |  |  |  |
| --- | --- | --- | --- |
| Dr Name: |  | | |
| Phone: | B/H: | | A/H: |
| Address: |  | | |
| Suburb: | | P/C: |
| Hours the doctor can be contacted: | |  | |

**DENTIST DETAILS**

|  |  |  |  |
| --- | --- | --- | --- |
| Dentist Name: |  | | |
| Phone: | B/H: | | A/H: |
| Address: |  | | |
| Suburb: | | P/C: |
| Hours the dentist can be contacted: | |  | |

**CURRENT MEDICAL HISTORY**

|  |  |
| --- | --- |
| Current Medical Problems: |  |
| Regular medication including supplements, stating name, dosage: |  |
| Allergies: |  |
| Sports injuries (Please list any injury which is current/recurring or requires surgery) |  |

**Have you had (please tick)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Yes | No |  | Yes | No |
| Epilepsy |  |  | Heart Murmur |  |  |
| Hepatitis A |  |  | Asthma/Bronchitis |  |  |
| Diabetes |  |  | Hernia |  |  |
| Heart Problems |  |  | Concussion |  |  |

**Other (Please provide details)**

|  |
| --- |
|  |

**Do you wear (please tick)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Yes | No |  | Yes | No |
| Glasses |  |  | Protective equipment |  |  |
| Contact lenses (hard) |  |  | Mouth Guard |  |  |
| Contact lenses (soft) |  |  |  |  |  |

|  |  |  |
| --- | --- | --- |
| **Have you sustained a fracture in the last 3 years?** | Yes | No |
| **If yes, where?** | | |
| **Have you sustained a dislocation in the last 3 years?** | Yes | No |
| **If yes, where?** | | |
| **Do you suffer recurring pain in any joint in play/practice?** | Yes | No |
| **If yes, which joint?** | | |
| **Do you suffer back or neck pain?** | Yes | No |
| **Have you ever been treated for a head, neck or spinal injury?** | Yes | No |
| **If yes, provide details?** | | |
| **If yes, does this affect your performance** | Yes | No |

**To the best of my knowledge, all information contained on this sheet is correct. I accept that any costs associated with ambulance transport are not covered by the Northern Saints Football Club and will be the responsibility of the individual.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Sign (Parent or Guardian)** |  | **Date:** | **/ /** |

**INDEMNITY**

**I request that you accept this application form for my child/ren to train and play football with the Northern Saints Football Club. I understand that the Association has appropriate insurance cover and I agree that I will only pursue claims for damages or injuries against the said insurance policies, and not its officers, servants or agents. I also accept that it is compulsory to wear a mouth guard.**

**I the undersigned:**

1. **Hereby declare that the above information is complete and correct.**
2. **In the case of injury or accident and if I cannot be contacted, I give permission to the team designated First Aid Officers (Trainer) to seek medical treatment or call for an ambulance. I will be responsible for any cost incurred.**
3. **Understand that as part of this Registration with Northern Saints Football Club that I will be expected to provide assistance with team support activities during the season.**
4. **Will adhere to all the Club’s rules, policies and ethos at all times.**

|  |  |  |
| --- | --- | --- |
| **SIGNATURE OF PARENT/GUARDIAN:** |  | **Date: / /** |

|  |  |  |  |
| --- | --- | --- | --- |
| **CLUB USE:** |  |  |  |
| **RECEIPT ISSUED:** | **YES** | **NO** | **Receipt #** |
| **BIRTH CERITIFICATE OR PASSPORT RECEIVED** | **YES** | **NO** |  |
| **Returned To:** |  | | **Date: / /** |

**PARENTAL ASSISTANCE**

Please note that without parental involvement the NSFC may not be able to field a team and this would result in your child being unable to play.

If parents want to assist by fulfilling any of the following roles they should speak to their relevant coach.

* Team Manager
* Team Runner
* Training Drills
* Trainer (game day first aid)

NB: If you wish to take on a role as Trainer you must have current Level 1 First Aid Certificate. The EDFL accredited course will be funded by the Northern Saints.

**MATCH DAY SUPPORT ROLES**

**Team Managers will create a roster for Match Day Roles. All families will be placed on the roster. PARTICIPATION BY PARENTS IS COMPULSORY.**

Roles that MUST be filled include:

* Goal Umpire
* Time Keeper
* Umpire Escort
* Water Boy
* Canteen – this is only applicable at the 7 home games of the season

**MEDIA RELEASE PERMISSION**

During the course of the football season, photos of the players at Northern Saints Football Club may be taken for the purpose of promotion, advertising, inclusion on our Website, Club Newsletter, EDFL Website, Local Paper or Club Room.

Please indicate if you do not allow the club to use images for above stated purpose.

**I will NOT allow my child’s image to be used for any promotional purpose.**

(Please indicate by placing a X in the box)

|  |
| --- |
| **Northern Saints Football Club**  **PLAYERS CODE OF CONDUCT** |

I, ………………………………………., hereby commit, to the best of my ability, to uphold the following NSFC Players Code of Conduct;

1. Play by the rules – the rules of my club and the laws of the game.
2. Never argue with an umpire or other official – without these people, I can’t play football.
3. Control my temper – verbal abuse of officials and sledging other players doesn’t help me

enjoy or win any games.

1. Be a team player – It’s a team game; I will treat it that way.
2. Treat all players, as I would like to be treated – fairly and with respect.
3. Co-operate with my coach, the umpires and teammates.
4. Play for my own enjoyment and to improve my skills.
5. I will NOT bully.
6. I will NOT use unacceptable language.
7. Don’t use ugly remarks based on race, religion, gender or ability – I’ll let down my coach,

teammates and family if I do – and many such comments are actually now illegal.

1. I will always behave in a respectful manner whenever representing my club as a player,

official or spectator.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| PLAYER (sign): | |  | PRINT NAME: | |  |
| DATE: / / 20 | | |  | | |

|  |
| --- |
| **Northern Saints Football Club**  **PARENT’S/GUARDIANS & SUPPORTERS CODE OF CONDUCT** |

I, ………………………………………., hereby commit, to the best of my ability, to uphold the following NSFC Parents/Guardians Code of Conduct;

1. Remember that I am there for the participants to enjoy the game.
2. Encourage participation, but don’t force it.
3. Teach that enjoyment is more important that winning.
4. Never ridicule mistakes or losses – supporters are there to support not downgrade.
5. Lead by example and respect all players, coaches, umpires, club officials and spectators –

physical or verbal abuse will not be tolerated.

1. Recognise all volunteers who are giving up their valuable time.
2. Never publicly criticise umpires – raise personal concerns with club officials in private.
3. Don’t use ugly remarks based on race, religion, gender or ability – I’ll let down my family and

myself if I do – and many such comments are actually now illegal.

1. Never enter the field of play during or directly after a game.

***By registering my/our child with Northern Saints Football Club I/we agree to abide by these principles. I/we support the club in its undertakings and encourage the club to take any necessary disciplinary actions including the suspension and banning where warranted of any players, parents/guardians and/or spectators for repeated or serious breaches of these Codes of Conduct.***

|  |  |  |  |
| --- | --- | --- | --- |
| PARENT/GUARDIAN (sign): |  | Date: | / /20 |
| Print Name: |  |  |  |
| **Northern Saints Football Club**  **REGISTRATION POLICY** | | | |

**I, …………………………………………………, am fully aware that my and my childs/rens continued involvement and registration with the NSFC is contingent on our abiding by the registration policy outlined below:**

1. I agree to pay the registration fee**, IN FULL**, by the first game of the season.
2. I further understand that until the registration fee is paid IN FULL my child/ren will not be eligible to play for the Club.
3. I understand should I choose to leave the club after the commencement of the season only a pro rata will be given.
4. I agree to assist with team/club duties on at least 5 occasions throughout the season.
5. I understand that if I do not assist with team/club duties when rostered to do so, my child/ren will be ineligible to play until I do.
6. I understand that should my child/ren or I be involved in an incident on game day we will be required to face a disciplinary board in the week immediately after the incident at which time action will be taken by the Club in relation to the incident. The club will reserve the right to apply whatever punitive actions as it sees fit. The decision of the disciplinary board will be final.
7. I understand that this policy acts as my first and second written warning.
8. I understand that if mine or my childs/rens behaviour (on or off the field) brings the Club into disrepute I will be asked to immediately leave the Club.
9. I understand that if I am asked to leave the Club under such circumstances outlined in points 5 or 7 no refund of fess will be given.
10. I understand that I am required to collect my child PROMPTLY after training.
11. I further understand that if my child is still at the Club unsupervised by a parent/guardian 10 minutes after the end of training (or at the conclusion of ANY club function/event) a child minding fee of $20 will be charged for each additional 10 minutes that they are there.
12. I understand, should it be necessary to charge me the child minding fee, as outlined in point 8, my child/ren will be ineligible to play until the fee is paid.

**By registering my/our child with Northern Saints Football Club I/we agree to abide by the registration policy as outlined above.**

**I understand that all members of the Northern Saints Football Club (officials, players, parents and spectators) have an obligation to uphold the good standing of the Club at all times and in all circumstances and that incidents of bad behaviour will not be tolerated by the Club.**

|  |  |
| --- | --- |
| **PARENT / GUARDIAN (sign):** |  |
| **PRINT NAME:** |  |
| **NSFC PLAYER(S) NAME:** |  |
| **DATE:** | / / 20 |