



IRFU

# IRISH RUGBY FOOTBALL UNION Youth/Adult Player Registration Form

PLEASE USE BLOCK CAPITALS ONLY

Please return completed form with a copy of your Birth Certificate to your club Coach/Youth Officer (if you are under 18).

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. \_\_\_\_\_

Signed(Player): \_\_\_\_\_ Print Player Name: \_\_\_\_\_

I, \_\_\_\_\_, confirm the above information is correct and that the above named player has permission to participate in rugby activities for the above named club.

Signed (Parent/Guardian): \_\_\_\_\_ Date \_\_\_\_\_

Signed (Youth Co-Ordinator): \_\_\_\_\_ Dated: \_\_\_\_\_

### Data Protection

It is necessary for ..... ("the Club") to collect and record certain personal data relating to each member, including the member's name, address, telephone number and date of birth. The data about each member shall be provided to the IRFU, the relevant Branch and other third parties to facilitate any services provided relating to the Irish Rugby Football Union's Clubhouse Website (the "Website") and published on the Website. It is the IRFU that controls any data provided. The system will be used for management and administration purposes only. Any party receiving the information shall not use it for commercial purposes or release it to any party without prior approval.

The Club wishes to ensure that each of its members (for the purposes of applicable data protection legislation) explicitly and unambiguously consents to the processing of personal data by the Club in conjunction with its ordinary business. Therefore, the member's parent or guardian should confirm the following:

I consent to the use of the player's personal details as set out above and for such purposes as the IRFU considers reasonable and appropriate (including those activities detailed above).

Each member has the right to request in writing a copy of any personal data about themselves which is held and have amended any personal data which is incorrect, incomplete or misleading.

Signed(Parent/Guardian): \_\_\_\_\_ Date: \_\_\_\_\_

Print Name(Parent/Guardian): \_\_\_\_\_

### **Club Use only**

IRFU ID No.....

Copy of Birth Cert

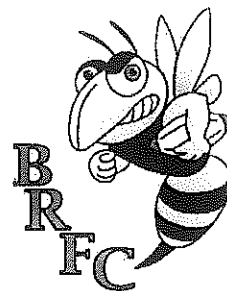
Signed Photos

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

# Balbriggan RFC

## Youth Rugby Registration Form

### 2018/2019 Season



#### Medical Requirements ( If Any)

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- In the event of illness or injury, I give permission for medical treatment to be administered where considered necessary by a nominated first aider or by a suitably qualified medical practitioner
- I understand that photographs will be taken during or at club events and may be used in the promotion of the club by BRFC on the website and social media and by the IRFU/ Leinster Branch where applicable. **IF you consent for yours child's photograph to be used please tick here**
- By signing this form, I agree to adhere to the IRFU code of conduct at all times. (Copy available at club)
- ***Balbriggan RFC may use your contact details to send you information about the club and events relating to Balbriggan RFC and the IRFU. Under New General Data Protection Regulations (EU) 2016/679 (GDPR) regulations, If you wish to authorise Balbriggan RFC to contact you via the information provided on this form please Tick here***

Parent / Guardian Signature: \_\_\_\_\_

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