

Milton Keynes & Border Counties Youth Football League Player / Parent RESPECT Agreement and Registration Form

......PLAYER'S FULL NAME(S) IN BLOCK CAPITALS

Parent(s)/Guardian(s)		
Wishes to register for Age Group Age Group		
I/we agree that whilst attending youth games I/we will:		
Play a part and observe the FA's Respect Code of Conduct for spectators	and	
parents/carers at all times. 2) Remember that children play for FUN		
Applaud effort and good play as well as success		
Always respect the match officials' decisions		
5) Remain outside the field of play and within any Designated Spectator Area		
6) Let the coaches do their job and not confuse the players by telling them wh		
7) Encourage the players to respect the opposition, referee and match official		
8) Avoid criticising a player for making a mistake – mistakes are part of learni		
9) Never engage in, or tolerate, offensive, insulting, racist, sexist or abusive b	ehaviour	
10) Be appreciative of, and abide by, the Rules of the Competition.11) Understand & accept the Rules & Regulations of the Club registered to.		
12) Accept and uphold any decisions made by the Competition's Disciplinary		
Sub-committee (subject to any Appeal through the Club).		
13) Always behave in a sporting, friendly & acceptable manner, presenting a g	ood and	
proper example to all players, encouraging respect for opposition and mate		
14) Understand that breaches of the code may result in action being taken by t		
County FA, League or The FA.		
15) Finally, I/We also confirm that neither I/We nor my/our son/daughter has an debt outstanding, nor kit not returned, to any previous Club.	ny financial	
Signature(s)		
-		
Date: Post Code:		
PLAYER REGISTRATION FORM		
I, apply for Registration in the above Con	npetition	
playing for (Club/Team)Age Group		
I confirm that I will follow the Respect Code of Conduct.		
Player Signature		
ALL INFORMATION WILL BE HELD IN ACCORDANCE WITH THE COMPETITION'S DATA PROTECTION PO	LICY	



Milton Keynes & Border Counties Youth Football League Player / Parent RESPECT Agreement and Registration Form

X

	PLAYER'S FULL NAME(S) IN BLOCK CAPITALS
Parent	t(s)/Guardian(s)
Wishes	s to register for Age Group
I/we a	gree that whilst attending youth games I/we will:
1)	Play a part and observe the FA's Respect Code of Conduct for spectators and
2)	parents/carers at all times.
2) 3)	Remember that children play for FUN Applaud effort and good play as well as success
3) 4)	Always respect the match officials' decisions
4) 5)	Remain outside the field of play and within any Designated Spectator Area
6)	Let the coaches do their job and not confuse the players by telling them what to do
7)	Encourage the players to respect the opposition, referee and match officials
8)	Avoid criticising a player for making a mistake – mistakes are part of learning
9)	Never engage in, or tolerate, offensive, insulting, racist, sexist or abusive behaviour
10)	Be appreciative of, and abide by, the Rules of the Competition.
11)	Understand & accept the Rules & Regulations of the Club registered to.
12)	Accept and uphold any decisions made by the Competition's Disciplinary
	Sub-committee (subject to any Appeal through the Club).
13)	Always behave in a sporting, friendly & acceptable manner, presenting a good and proper example to all players, encouraging respect for opposition and match officials.
14)	Understand that breaches of the code may result in action being taken by the Club, County FA, League or The FA.
15)	Finally, I/We also confirm that neither I/We nor my/our son/daughter has any financia debt outstanding, nor kit not returned, to any previous Club.
Signat	ture(s)
	PARENT/GUARDIAN
Date:	House number: Post Code:
	PLAYER REGISTRATION FORM
l	, apply for Registration in the above Competition ER'S FULL NAME IN BLOCK CAPITALS
playing	for (Club/Team)Age Group
I confir	m that I will follow the Respect Code of Conduct.
Player	Signature Date

ALL INFORMATION WILL BE HELD IN ACCORDANCE WITH THE COMPETITION'S DATA PROTECTION POLICY