

CLUB REGISTRATION FORM 2014/2015 Season

Print all details clearly in ball point pen, one form per player please.

FULL NAME.....

ADDRESS

Telephone Number..... Mobile:-.....

Please note e-mail is the preferred method of communication

E-mail address@.....

I confirm I wish to join Great Horwood FC for the 2014-2015 Season and agree that I will abide by the Club rules and 'Code of Conduct', copies of which are available on the website.

Costs:-

Player £35
Plus Match Fees of £5 per match

I am responsible for any fines imposed by the club, League, Football Association or any other body involved with Football Administration.

- I shall pay the club Subscription by **September 30th 2014**.
- I enclose a cheque made payable to 'Great Horwood Football Club'

Signature Date.....

Please indicate below if **you** or **someone you know** are willing to assist with any of the following:-

- | | |
|----------------------------|--------------------------|
| Half Time Teas and Coffees | <input type="checkbox"/> |
| Team Training | <input type="checkbox"/> |
| Running the Line | <input type="checkbox"/> |
| Refereeing Games | <input type="checkbox"/> |

Contact details

First Aid Qualification (if any)

Contact

Details.....

MEDICAL HISTORY

Please state any Medical condition the club should be aware of:-

All information will be kept in the strictest confidence.

MEDICAL DETAILS:

IN CASE OF EMERGENCY: Please supply contact telephone numbers.

Emergency Contact Telephone Number.....