



**Chipping Sodbury RFC Youth Sector Player Profile,
Membership and Parental Consent Form for Rugby Union
Activities 2023-24 Season**



IMPORTANT:

PAYMENT IS BY BANK TRANSFER ONLY (Details in Section 7)

Please email your completed form to csrfcyouthmembership@gmail.com

SECTION 1 – PERSONAL DETAILS. PLAYERS AND PARENT/GUARDIAN				
Name of Parent/Guardian		First Name		Surname
Address				
Parent/Guardian Email Address				
Mobile Tel. Parent/Guardian			Home Tel.	
Full Name of Child(s)		DOB	Team Age Group e.g. u8's	School Name
1 st Child				
2 nd Child				
3 rd Child				

Please review the club's policies concerning the use of photographing and videoing at chippingsodburyrfc.co.uk/safeguarding/

SECTION 2 – PHOTOGRAPHY AND VIDEOING	
	I confirm that I have read, or been made aware of the club's policies concerning the use of photographing and videoing.
	I understand and agree with the responsibilities which I and my child have in connection with these policies.
	I consent to the Club photographing or videoing my child's involvement in Rugby Union under the RFU's Child Protection and Best Practice guidelines.

SECTION 3 – EMERGENCY CONTACT DETAILS		
Name of an alternative adult who can be contacted in an emergency	Phone number(s) for alternative named adult	Relationship of this adult to child

SECTION 4 - VOLUNTERS		
Yes	No	We rely on volunteers to run the club. Please let us know if you can help.

SECTION 5 – CONSENT STATEMENT FROM PARENT/LEGAL GUARDIAN (Please tick each box where you agree)

Legal Authority to provide consent

<input type="checkbox"/>	I confirm that I have legal responsibility for the child named above and I am entitled to give this consent.
<input type="checkbox"/>	I confirm that to the best of my knowledge, all information provided on this form is accurate and that I will undertake to advise the Club of any changes to this information and agree that the above-named player can be bound by the Laws and Resolutions of the RFU and its constituent body.

Consent to participate

<input type="checkbox"/>	I agree with the child named above taking part in the activities of the Club.
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Medical Consent

<input type="checkbox"/>	I give my consent that in an emergency, the Club may act in loco parentis if the need arises for the administration of emergency first aid and/or other medical treatment which in the opinion of a qualified medical practitioner may be necessary. I also understand that in such an occurrence that all reasonable steps will be taken to contact me or the alternative adult which I have named in Section 2 of this form.
<input type="checkbox"/>	I confirm that to the best of my knowledge, my child does not suffer from any medical condition other than those detailed by me in the section below.

MEDICAL INFORMATION – Please detail below any important medical information that the Club need to know (e.g. Allergies, medical conditions, current medication, injuries etc.)

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DIETARY INFORMATION – Please detail below any special dietary needs

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SECTION 6 – FAMILY SOCIAL MEMBERSHIP

Full name Parent/Guardian	Full name partner/spouse (if any)	Full name nonplaying sibling(s)

Agreement to Club Rules and Policies (Please tick each box to confirm)

<input type="checkbox"/>	I agree to abide and ensure that all family members and visitors that I bring into the club or who attend in my place abide, by the rules of the Club and follow the guidelines contained within the RFU and Club Welfare Policies and Parent Guidelines.
<input type="checkbox"/>	I recognise that disciplinary action which includes expulsion from the Club and facilities may be taken for serious breaches of the Club and RFU Rules and Welfare policies.
<input type="checkbox"/>	I understand that this Youth Section Family Membership allows me to use the Club facilities but does not provide me full CSRFC voting rights. It does however provide voting rights (1 per family) for the Youth Section AGM and any Special Meetings.

SECTION 7 – PAYMENT (Please check 1 box)

1 Child:	2 Children:	3 Children:
<input type="checkbox"/> Membership £50	<input type="checkbox"/> Membership £80 (Total)	<input type="checkbox"/> Membership £110 (Total)

All registered and annual subs-pad players are covered by RFU Personal Injury Policy. The cover is somewhat limited, and you may wish to take additional cover.

Membership Fees are due to be paid by the end of October 2023. It should be note that non-paid players will not be insured.

Payments are to be made by Bank transfer ONLY. We can't accept cash of cheques.

Account Number: 35369960

Sort Code: 30-84-20

Please use your child's name and age group as the Reference.

SECTION 8 – EQUITY POLICY

Chipping Sodbury Rugby Football Club is committed to ensuring that equity is incorporated across all aspects of its development. In doing so it acknowledges and adopts the following Sport England definition of sports equity:

- Sports equity is about fairness in sport, equality of access, recognising inequalities and taking steps to address them. It is about changing the culture and structure of sport to ensure it becomes equally accessible to everyone in society.
- Chipping Sodbury Rugby Football Club respects the rights, dignity and worth of every person and will treat everyone equally within the context of their sport, regardless of age, ability, gender, race, ethnicity, religious belief, sexuality, or social/economic status.
- Chipping Sodbury Rugby Football Club is committed to everyone having the right to enjoy their sport in an environment free from the threat of intimidation, harassment, and abuse.
- All club members have a responsibility to oppose discriminatory behaviour and promote equality of opportunity.

The Club will deal with any incidence of discriminatory behaviour seriously, according to the club disciplinary procedures.

SECTION 9 – FOR CLUB USE ONLY

SECTION 10 - SIGNATURES

Please ensure you have completed all sections above before electronically signing. Once signed please email to csrfcyouthmembership@gmail.com.

DATA PROTECTION– The Club will use the Information provided on this form to administer his/her rugby union activity at the Club and any activities in which he/she participates through the Club. In some cases, this may require the club to disclose information to the Playing League, Service Area of RFU. In the event of a medical issue or a safeguarding concern arising, the Club may disclose certain information to doctors and/or police, children’s social care, the Courts and/or probation officers and potentially to the RFU or the RFU investigators.