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|  Adrenalin  Devon Junior & Minor league |
|  Club Player Registration  |
|  Season 2023 - 2024 |

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| Player Fan Number: |  | DJML Form 5 |
| Club Name: | Team Age Group: |  |

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| **A copy of this form must be available at all matches and training sessions in which the registered person is taking part** |

All Clubs and their teams shall support the FA Respect Program. A Respect League, its Clubs and Teams seek to play all their fixtures in a fair, competitive but not antagonistic environment. Everyone has a collective responsibility to create a fair, safe and enjoyable environment in which all games may take place.

Every playing member of a member club must fully complete and sign a Player Registration Application Form binding him or her to play for that particular Club for which they sign. **Forms are obtained from League Officer or Online and must be Inputted on to the Whole game (WGS) registration system by a club official**). Contract players and Category 1, 2, 3 Academy Players are not permitted in this competition with the exception of those players who are registered under contract with the same Club operating at Steps 1 to 6 of the National League System. Players that attend Centre of Excellences or Development Centre’s can also play club football. Registrations open 1st July registrations will not be Confirmed until 15th July(or when the WGS system opens up,, if a Player is registered on the system the league has the right to ask for Dated proof of Parents Consent.

**Forms must be fully completed, and details updated onto WGS – registrations are valid for one season only**

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| **Players Details**: Full Name: | Male / Female/ Other (Delete) |
| Players Date of Birth: | School College: |
| Player’s Full Address: | School Year (September): |
|  | Telephone Contact:  |
| Postcode: | Player Signature: |

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| **Medical Details:** (Please indicate if you have any serious medical conditions, we should be aware of): |
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| Full Name: | Parent Signature:  |
| Email Address: | Parent DOB: |
| Landline Number: | Telephone Number: |

 **Parent / Carer Emergency Details:**

 **2nd Emergency Contact:** (in the event the above person cannot be contacted)

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| Full Name: | Telephone Number: |
|  | Mobile Number: |

I agree to the above named person being registered as a playing member of the named football club and confirm the date of birth given is true. Providing a false date of birth is considered a serious offence. In the event that the above-named person is injured whilst playing football / travelling to and from football events and I am not present in person or cannot be contacted on the above number(s), I hereby give my consent for this person to receive medical attention from a responsible adult (in the case of a girl, by another female adult) who will provide the necessary care and where required will supervise emergency aid on or off the field of play.