

**GREENFIELDS**



**Y . F . C .**

## **GREENFIELDS YFC REGISTRATION PACK**

**TEAM NAME – U \_\_\_\_\_**

### **NOTES TO PARENTS AND PLAYERS**

- 1. PLEASE COMPLETE PARENTS/ CARERS PAGE FULLY GIVING FULL NAMES AND ADDRESSES, PLEASE ALSO ENSURE YOU GIVE YOUR EMAIL ADDRESS AND DATE OF BIRTH AS THESE ARE REQUIRED TO COMPLETE REGISTRATION. BEFORE SIGNING ENSURE THAT YOU HAVE READ AND ARE HAPPY WITH THE CODE OF CONDUCT FOR PARENTS/CARERS.**
- 2. PLEASE COMPLETE PLAYER PAGE FULLY WITH FULL NAMES AND ADDRESS. BEFORE THE PLAYER SIGNS PLEASE ENSURE THAT THEY HAVE READ AND ARE HAPPY WITH THE CODE OF CONDUCT FOR YOUNG PLAYERS.**
- 3. PLEASE COMPLETE THE STANDING ORDER FORM AND EITHER TAKE THIS TO YOUR BANK TO SET UP OR USE THESE DETAILS TO SET UP ON YOUR ONLINE BANKING.**
- 4. AS PART OF THE REGISTRATION PROCESS WE REQUIRE A HEAD AND SHOULDERS PHOTO OF THE PLAYER BEING REGISTERED. ALL PHOTOS WILL BE UPLOADED ONTO THE FA'S SECURE REGISTRATION SYSTEM. ONCE UPLOADED THESE PHOTOS WILL BE DELETED AND NO PHOTOS WILL BE STORED BY GREENFIELDS YFC. PLEASE SEND THIS TO YOUR TEAM MANAGER TO COLLATE.**
- 5. IF YOU ARE NEW TO THE CLUB (NOT REGISTERED FOR PREVIOUS SEASON) PLEASE CAN YOU ATTACHED A COPY OF EITHER THE PHOTO PAGE OF YOUR PASSPORT OR BIRTH CERTIFICATE AS WE WILL NOT BE ABLE TO REGISTER YOU WITHOUT THESE AND COULD DELAY WHEN YOU ARE AVAILABLE TO PLAY.**

# GREENFIELDS YFC REGISTRATION FORM PARENT/CARERS

**GREENFIELDS**



**Y . F . C .**

[www.greenfieldsyfc.com](http://www.greenfieldsyfc.com)

**PARENTS/CARER FULL NAME** .....

**ADDRESS** .....

.....

.....

**POST CODE** .....

**DATE OF BIRTH** .....

**EMAIL ADDRESS** .....

**HOME PHONE NUMBER** .....

**MOBILE NUMBER** .....

**FAN NUMBER (IF KNOWN)** .....

## **PARENTAL/CARER CONSENT**

IN THE EVENT THAT MY SON/DAUGHTER IS INJURED WHILST TRAVELING TO AND FROM FOOTBALL AND CANNOT BE CONTACT ON THE ABOVE NUMBERS, I HEREBY GIVE CONSENT FOR MY CHILD TO RECEIVE MEDICAL ATTENTION.

## **CLUB CODE OF CONDUCT** (SEE NEXT PAGE)

I AGREE TO BE BOUND BY AN TO OBSERVE THE CLUB RULES/CODES OF CONDUCT AND THE RULES AND REGULATIONS OF THE FOOTBALL ASSOCIATION, THE COUNTY FOOTBALL ASSOCIATION, AND ALL COMPETITIONS IN WHICH THE CLUB PARTICIPATES.

## **CONSENT FOR USE OF THE FA WHOLE GAME SYSTEM AND USING IMAGES**

I CONSENT TO GREENFIELDS YFC HOLDING THE PLAYERS DETAILS ONLINE (FA WHOLE GAME SYSTEM) TAKING TEAM AND ACTION PHOTOS OF MY CHILD, I ALSO UNDERSTAND THE STATED RULES AND CONDITIONS AND I CONFIRM THAT I AM LEGALLY ENTITLED TO GIVE THIS CONSENT.

## **COVID-19 CONSENT TO PLAY**

I CONSENT FOR MY CHILD TO PARTICIPATE IN TRAINING AND MATCHES AND I AM HAPPY WITH GREENFIELDS YFC'S COVID PLANING ARRANGEMENTS. I CONFIRM THAT MY CHILD AND MYSELF WILL COMPLETE A COVID SELF AESSMENT IF REQUIRED BEFORE ANY TRAINING OR MATCHES.

IF A PLAYER OR SPECTATOR RECEIVES A RED/YELLOW CARD OR FINE FROM THE FOOTBALL ASSOCIATION OR COUNTY FOOTBALL ASSOCIATION, THE PARENT GUARDIAN OR SPECTATOR WILL BE RESPONSIBLE FOR ITS PAYMENT.

ANY GREENFIELDS YFC JUNIOR KIT ISSUED TO YOU MUST BE RETURN TO THE MANAGER AT THE OF THE SEASON OR SUCH TIME THAT YOU ARE NO LONGER A MEMBER OF THE CLUB.

**PARENT SIGNED** .....

**PRINT NAME** ..... **DATE** .....

*If we behave positively  
during practice and matches,  
our children will too.*

*By setting a good example, we'll help  
build a supportive environment in which  
everyone can enjoy themselves.*

## **Play Your Part** (Code of Conduct)

### **Spectators and Parents/Carers**

**Play your part and support  
The FA's Code of Respect:**

- Have fun; it's what we're all here for!
- Celebrate effort and good play from both sides
- Always respect the Referee and coaches and encourage players to do the same
- Stay behind the touchline and within the Designated Spectators' Area (where provided)
- When players make mistakes, offer them encouragement to try again next time
- Never engage in, or tolerate offensive, insulting or abusive language or behaviour

**I understand that if I do not follow the Code, I may be:**

- Issued with a verbal warning or asked to leave
- Required to meet with the club committee, league or CFA Welfare Officer
- Obligated to undertake an FA education course
- Requested not to attend future games, be suspended or have my membership removed
- Required to leave the club along with any dependents and/or issued a fine



**RESPECT**

**We ONLY  
do  
Positive.**



# GREENFIELDS YFC REGISTRATION FROM PLAYER



[www.greenfieldsyfc.com](http://www.greenfieldsyfc.com)

PLAYERS FULL NAME .....

ADDRESS .....

.....

.....

POST CODE .....

DATE OF BIRTH .....

NATIONALITY .....

HOME PHONE NUMBER .....

## **EMERGENCY DETAILS**

IN THE EVENT THAT THE PARENT CAN NOT BE CONTACTED, PLEASE GIVE TWO ADDITIONAL CONTACT NAMES AND NUMBERS.

NAME ..... NUMBER .....

NAME ..... NUMBER .....

## **MEDICAL DETAILS**

PLEASE MAKE YOUR MANAGER AWARE OF ANY MEDICAL CONDITIONS THAT COULD IMPACT PLAYING OR TRAINING NOW OR DURING THE PLAYING SEASON.

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## **CLUB CODE OF CONDUCT** (SEE NEXT PAGE)

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## **COVID-19 CONSENT TO PLAY**

I CONSENT FOR MY CHILD TO PARTICIPATE IN TRAINING AND MATCHES AND I AM HAPPY WITH GREENFIELDS YFC'S COVID PLANNING ARRANGEMENTS. I CONFIRM THAT MY CHILD AND MY SELF WILL COMPLETE A COVID SELF ASSESSMENT IF REQUIRED BEFORE ANY TRAINING OR MATCHES.

IF A PLAYER OR SPECTATOR RECEIVES A RED/YELLOW CARD OR FINE FROM THE FOOTBALL ASSOCIATION OR COUNTY FOOTBALL ASSOCIATION, THE PARENT GUARDIAN OR SPECTATOR WILL BE RESPONSIBLE FOR ITS PAYMENT.

ANY GREENFIELDS YFC JUNIOR KIT ISSUED TO YOU MUST BE RETURN TO THE MANAGER AT THE OF THE SEASON OR SUCH TIME THAT YOU ARE NO LONGER A MEMBER OF THE CLUB.

PLAYER SIGNED .....

PRINT NAME ..... DATE .....

Play your best.  
Be your best.

Make sure you and everyone  
around you has a good time  
on and off the pitch.

## Play Your Part (Code of Conduct)

### Young Players

Play your part and support  
The FA's Code of Respect:

When playing football, I will:

- Always play my best for the benefit of the team
- Play fairly and be friendly
- Play by the rules and respect the Referee
- Shake hands with the other team - win or lose
- Listen carefully to what my coach tells me
- Understand that a coach has to do what's best for the team
- Talk to someone I trust or the club welfare officer if I'm unhappy about anything at my club
- Encourage my team mates
- Respect the facilities home & away

I understand that if I do not follow the Code,  
I may:

- Be asked to apologise to whoever I've upset
- Receive a formal warning
- Be dropped, substituted or suspended from training



**RESPECT**

We ONLY  
do  
Positive.



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**Y. F. C.**

### Standing Order Mandate

Name of Bank (Your Bank Name Here).....

Address (Your Bank Address).....

New Instruction

Player/Players Name ..... Age Group Under 6 / 7 / 8 / 9 / 10 / 11 / 12 / 13 / 14 / 15 / 16

**ACCOUNT TO BE DEBITED**

**BENEFICIARY DETAILS**

SORT CODE (Your Sort Code)	<input type="text"/>	BANK	<input type="text" value="NATWEST Bank"/>
ACCOUNT NUMBER	<input type="text"/>	BRANCH DETAILS	<input type="text" value="UPPER PARKSTONE,&lt;br/&gt;200 Ashley Road, Parkstone, Poole, BH14 9DB"/>
ACCOUNT NAME	<input type="text"/>	SORT CODE	<input type="text" value="5 4 2 1 3 0"/>
		ACCOUNT NUMBER	<input type="text" value="0 9 8 3 0 0 8 1"/>
SERVICE TAKEN	<input type="text" value="Subs2022/23 Season"/>	BENEFICIARY NAME	<input type="text" value="GREENFIELDS YOUTH FC"/>
		REFERENCE (Player) Example (U7-A.Green)	<input type="text" value="U -"/>

**PAYMENT DETAILS**

AMOUNT OF FIRST PAYMENT £	<input type="text" value="65.00"/>	DATE OF FIRST PAYMENT	<input type="text" value="01"/> <input type="text" value="08"/> <input type="text" value="2022"/>
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AMOUNT OF USUAL PAYMENT £	<input type="text" value="25.00"/>
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AMOUNT OF USUAL PAYMENT IN WORDS	<input type="text" value="Twenty Five Pounds Only"/>
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TO BE PAID MONTHLY

DATE OF USUAL PAYMENT	<input type="text" value="1st"/>
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AMOUNT OF LAST PAYMENT £	<input type="text" value="25.00"/>	& DATE OF LAST PAYMENT	<input type="text" value="01"/> <input type="text" value="03"/> <input type="text" value="2022"/>
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OR PLEASE CONTINUE PAYMENT UNTIL FURTHER NOTICE

CUSTOMER SIGNATURE(S) ..... DATE

CUSTOMER CONTACT TELEPHONE NO:

*All boxes must be completed in order for the standing order to be processed/ please note non-payment may lead to your child not being able to participate or transfer until paid up to date.*