



# Tarleton Rugby Union Football Club

## Young Player Membership Form

Team Under \_\_\_\_\_'s

\*Christian Name/s \_\_\_\_\_

\*Surname \_\_\_\_\_

\*E-mail address \_\_\_\_\_

\*Address \_\_\_\_\_

\*Post Code \_\_\_\_\_

\*Date of Birth \_\_\_\_\_

\*Home telephone \_\_\_\_\_ \*Mobile telephone \_\_\_\_\_

\*School Name \_\_\_\_\_

\*School Address \_\_\_\_\_

\*Post Code \_\_\_\_\_

**IF THE PLAYER IS UNDER 16 YEARS OLD A PARENT OR GUARDIAN SHOULD COMPLETE THE FOLLOWING SECTION**

\*Full Name of Parent/Guardian \_\_\_\_\_

\*Address \_\_\_\_\_

\*Post Code \_\_\_\_\_

\*Home telephone \_\_\_\_\_ \*Mobile telephone \_\_\_\_\_

\*E-mail address \_\_\_\_\_

Does your child have any health problems that the club and coaching staff should be made aware of? – If so, please give outline details

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature of Parent/Guardian \_\_\_\_\_

Date \_\_\_\_\_

**I confirm that I am the Parent/Guardian of the above named Player and accept that Tarleton RUFC will not be held responsible for any injuries my child might incur whilst playing Rugby albeit suitably supervised by the Coaching staff. Furthermore Tarleton RUFC cannot be held responsible for any belongings of Players that are lost or stolen during matches or training.**