

RUISHTON FOOTBALL CLUB

REGISTRATION FORM - 2025-26 SEASON



Website: www.ruishtonfc.co.uk

Facebook: Ruishton FC

Confidentiality: Details on this form will be held securely by Ruishton Football Club and will only be shared with those who need this information in accordance with our safeguarding procedures.

PLAYER CONTACT INFORMATION

Surname		First Name	
Date of Birth		Age Group ie U7, U8, U9, U10 etc	
Full Address			
Postcode		Team & Coach Name	

FA CLUB PORTAL CONNECTED PARENT/CARER EMERGENCY CONTACT DETAILS

The following information is required to complete online player registration via the FA Club Portal. If possible, please use the same contact details as last season.

	Main Parent Contact	Secondary Parent Contact
Parent / Carer Name		
Parent / Carer Email address		
Parent / Carer Date of birth		
Parent / Carer Emergency Mobile No.		

MEMBERSHIP FEES

The cost for this season is £150. Payment can be made in full or it can be paid as follows:

£30 registration fee - payable on return of this form to ensure your child is registered with the Club

£20 monthly instalments for 6 months - this includes costs for training and matches for the season.

Please indicate below if you are paying in full, or in monthly instalments of £20 from September 2025 to February 2026. Please also indicate below if there is a sibling in the Club so we know to apply a sibling discount.

Paying in full now		Paying in instalments		Sibling discount		Sibling name & age group	
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Please note we are a cashless Club, so we can only accept payment by BACS. Thank you for your understanding

BACS to Ruishton Football Club, Lloyds Account Sort Code 30-98-97 Account No. 59228968

**Please ensure you complete the
Medical Information and Consent form overleaf.**

FOR ADMIN USE ONLY

Date form received	Date registration payment received	Date submitted to League	Date approved by League	Medical info updated for Team Manager

MEDICAL INFORMATION AND CONSENT (To be completed by Parent / Carer)

In case of emergency and as part of the Club's responsibility to all its members, ALL Club Members are required to complete this medical information form as accurately as possible. Details will be held securely with access restricted to Club officials who need to know in accordance with our safeguarding policy.

MEDICAL INFORMATION (please tick as appropriate)		
Are there any specific medical conditions requiring medical treatment?	No	Yes, please give details
Details of medication required (eg tablets, inhaler)		
Are there any other medical conditions or disabilities to be aware of?	No	Yes, please give details
Are there any allergies to be aware of?	No	Yes, please give details

CONSENT		
VIDEO / PHOTOGRAPHY At times the Club may wish to take photos or videos of the team or individuals in it. We adhere to The FA Guidelines to ensure these are safe and respectful and used solely for the purposes for which they are intended, which is promotion and celebration of the activities of the Club and Teams and for training purposes. I give consent for images of my child to be used on Ruishton FC Facebook page and / or Ruishton FC website If you have any additional information which you wish to share with the Club, please contact the Club Secretary	Yes	No
FIRST AID To be best of my knowledge, my son/daughter is fit to participate fully in football training, involving strenuous physical and competitive matches. In the event of an accident, I give my permission for the Team Manager or coach appointed by Ruishton Football Club to administer first aid in accordance with current practice and to obtain appropriate emergency medical treatment.	Yes	No

PARENT / CARER PERMISSION

I give consent for my son/daughter to participate in Ruishton Football Club's training and matches. I accept that it is my responsibility to inform the Club directly of any changes to the details recorded on this form.

Signed (Parent / Carer):

Print name:

Date:

Please return this form to your Team Manager or to the Club Secretary as soon as possible.

If you have any questions regarding this form, please contact the Club Secretary by email – ruishtonfcsec@gmail.com