

**PLEASE RETAIN THIS INFORMATION SHEET – DO NOT RETURN WITH THE COMPLETED PLAYER DETAILS FORM**

Parents (guardians) are responsible for their own children. Please ensure safe supervision at all times. Players must wear shin-pads for all football sessions. You agree to your child participating in the football sessions. TVYFC and SIS Coaches have a third party policy which provides cover to children participating in the football sessions against injury or loss to him/her, providing that TVYFC or SIS, it's servants or agents, have been negligent. Parents may take out their own additional cover if they so wish.

Data - we will use your and your child's Data as set out in the Club Privacy Notice - see the Club website [www.timperleyvillaafc.co.uk](http://www.timperleyvillaafc.co.uk) under 'Useful Documents'.

This club is supporting The FA's Respect programme to ensure football can be enjoyed by everyone in a safe and positive environment. By signing this form you agree to comply with the FA 'Respect' initiative and the Code of Conduct as printed below.

### **Code of Conduct - Spectators and Parents/Carers**

*Remain outside the pitch area*

*Never engage in, or tolerate, offensive, insulting, aggressive or abusive language or behaviour*

*Always respect the coaches and match officials' decisions*

*Applaud effort and good play as well as success, from all players*

*Remember that children play for FUN*

*Let the coaches do their job and do not confuse the players by telling them what to do or shouting instructions*

*Encourage the players to respect other players, coaches & match officials*

*Never criticise a player for making a mistake - mistakes are part of learning*

*Do not pressure players. Effort and performance are important, not the result.*

*Display patience – children are not mini-adults. Do not expect too much either physically or mentally.*



**IN CONJUNCTION WITH**



**U5 Age Group (Reception)  
U6 Age Group (Year 1)**

**TIMPERLEY VILLA YFC & SIS – PLAYER DETAILS FORM – U5 (Reception) / U6 (Year 1)**

Name of child		Current member	Yes / No	School	
Age group	U5/Reception    U6/Year 1	Date of birth		Home tel no.	
Home address				Postcode	

*Note – Age group is at 1<sup>st</sup> September 2020*

Parent details	Name	E-mail address	Mobile no.
Parent 1			
Parent 2			

Does your child have any Health Conditions (e.g. asthma, allergies etc.) we should be aware of? Yes / No

Should your child have any Medicine or Devices (e.g. inhaler or 'epi-pen') with them? Yes / No

Does your child have any Access, Communication, Language or Behavioural Needs? Yes / No

Does your child have any specific Religious or Cultural needs that we should be aware of? Yes / No

Is your child the subject of any form of Court Protection Order or Care Proceedings? Yes / No

If you have answered YES to any of these questions, please provide full details including details of any medications carried, particular care required, etc.:-

**Consent of Parent/Guardian (Legal Carer)**

**I agree to comply with the Code of Conduct and conditions as outlined on the Information Sheet**

Signed (Parent/guardian [legal carer]): \_\_\_\_\_ Please print name: \_\_\_\_\_ Date: \_\_\_\_\_