



## BALTIC YOUTH FOOTBALL CLUB

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

### **PLAYER MEMBERSHIP FOR 2020/2021 SEASON**

Dear Player/Parent,

We are pleased to invite you to join Baltic Youth Football Club. The Club saw a season of steady progress in 2020/2021 with the introduction of a new team at our youngest age groups of Under 7's, 9's and Under 12's squad. **BALTIC YOUTH FC** provides football for both boys and girls from under 4's to under 10's and adheres to FA guidelines for provision of a safe environment for young people in the provision of Grassroots Football in the local community.

Your application to join Baltic Youth Football Club acknowledges your acceptance of the values and principles as per the 'Player and Parent Agreement' and the "**FA RESPECT**" guidelines for the 'Club Codes of Conduct'. We invite you to read these measures such that together we can maintain the standards for quality football and good sportsmanship established by Baltic Youth FC to date.

All our managers and officials are volunteers and give their time freely to help others, so please support them in whatever way you can throughout the season. BALTIC YOUTH FC always welcomes anyone who wishes to contribute to the Club and invite you to contact the Club Secretary for further details.

BALTIC YOUTH FC is currently working towards applying for Community Amateur Sports Club status to increase the value of your contribution and we invite you sign up to 'Gift Aid', as detailed in Section 6 of the Application Form.

Your **monthly** contribution helps to cover the cost of running the club, it pays for training facilities, pitches, goals, footballs, insurance, county/league/player registration fees and the provision of essential training and equipment for first aid. We will strive to keep the contribution to a minimum through 'Gift Aid', sponsorship. We trust you consider that for a full season of football activity our fees represent good value compared to other activities in our area.

### **NEW MEMBERSHIP APPLICATION FOR 2020/2021**

(Please use **Black Ink & BLOCK CAPITALS**)

| <b>1. PERSONAL DETAILS</b>           |               |  |
|--------------------------------------|---------------|--|
| <b>TEAM MANAGER</b>                  |               |  |
| <b>Title</b>                         | Miss / Master |  |
| <b>School Year<br/>Date of Birth</b> |               |  |
| <b>Surname</b>                       |               |  |
| <b>Forenames</b>                     |               | <i>Please include all middle names</i> |
|                                      |               |  |



|  |  |  |
|--|--|--|
| <b>Address<br/>1<sup>st</sup> Line</b> |  |  |
| <b>2<sup>nd</sup> Line</b>             |  |  |
| <b>Town</b>                            |  |  |
| <b>County</b>                          |  |  |
| <b>Post Code</b>                       |  |  |

**2. CONTACT DETAILS** \*Please delete as applicable

|   |  |                     |
|---|--|---------------------|
| <b>1<sup>st</sup> *Parent/Guardian Name</b> |  | <b>Relationship</b> |
| <b>E-Mail Address</b>                       |  |                     |
| <b>Telephone</b>                            |  |                     |
| <b>Mobile</b>                               |  |                     |
| <b>2<sup>nd</sup> *Parent/Guardian Name</b> |  | <b>Relationship</b> |
| <b>E-Mail Address</b>                       |  |                     |

**3. CONSENT** \*Please delete as applicable

|  |                |
|--|----------------|
| <b>3.1 MEDICAL:</b> If it becomes necessary for your child to receive medical treatment in your absence and you or the persons listed in Section 10 cannot be contacted, do you give your consent for a Club official to sign any document needed by the Medical Authorities?  | <b>*YES/NO</b> |
| <b>3.2 PHOTOGRAPHS AND VIDEO:</b> Do you agree that Club officials can take and store pictures of your child in line with FA guidelines and strictly for Club records, PR and promotional purposes or to benefit training exercises? Should you refuse permission, please inform your child not to participate in any team pictures.<br>PLEASE NOTE: The FA Guidelines are available from the Club Secretary             | <b>*YES/NO</b> |
| <b>3.3 DATA PROTECTION:</b> To ensure efficient operation of the Club, and facilitate timely delivery of information to players and their families, information submitted as part of your membership application is stored in electronic form. Do you agree that Club officials can store data and information about you and your child?<br>PLEASE NOTE: The Data Protection Policy is available from the Club Secretary | <b>*YES/NO</b> |
| <b>3.4 DISCLOSURE:</b> Do you agree that selected information may be disclosed to the Berks & Bucks County FA Limited? This information will not be given to any other person or organisation without your agreement.<br>PLEASE NOTE: The Data Protection Policy is available from the Club Secretary  | <b>*YES/NO</b> |



**For Office Use ONLY: Fee Y/N, Register updated Y/N, Membership Card Issued Y/N**

### 4. PARENTAL VOLUNTARY SUPPORT

Your Club is run and managed by volunteers, their support is vital to the running of Baltic Youth Football Club, so your support is ESSENTIAL to help provide a safe and supportive environment for your child and enable the Club to function.

*\*PLEASE delete as applicable. Where necessary FULL training will be provided.*

|                              |     |
|------------------------------|-----|
| Coaching                     | Yes |
| Referee                      | Yes |
| Sponsorship                  | Yes |
| Team Management              | Yes |
| Referee Assistant / Linesman | Yes |
| Website                      | Yes |
| First Aid                    | Yes |
| Administration               | Yes |
| Fundraising                  | Yes |
| Other: (please specify)      | Yes |

### 5. MEMBERSHIP FEE & GIFT AID

**MEMBERSHIP FEE:**

I enclose \*Cash / Cheque (*payable to 'Baltic Youth Boys & Girls Football Club'*)  
(\*Please delete as applicable)

***IF PAYING BY CHEQUE please write your child's name on the back along with your Team Manager's Name***

*If you application is not successful for any reason a full refund will be repayable.*

### 6. DECLARATION (\*Please delete as applicable)

**PLAYER:**

*I have read the **PLAYER & PARENT AGREEMENT** and **FA RESPECT CODE OF CONDUCT** and agree to abide by the values and principles they contain.*

Signature of **PLAYER**.....



**PARENT:**

I have read and agreed to the **PLAYER & PARENT AGREEMENT** and **CODE OF CONDUCT**.

I am signing in respect of the information provided in this application being correct.

I agree to the applicant being registered as a member of Baltic Youth Football Club under the terms of the Club Constitution (Copy available from the Club Secretary).

My child has my permission to participate in sports activities organised by Baltic youth Football Club during the current season.

I enclose the membership fee (For applicable charges please refer to covering letter).

Name of **\*PARENT/GUARDIAN**: .....

Signature of **\*PARENT/GUARDIAN**: ..... Date: ...../...../.....

**PLAYER'S MEDICAL INFORMATION THIS SHEET WILL BE**

**RETAINED BY YOUR TEAM MANGER AND TAKEN BY THEM TO ALL**

**TRAINING AND MATCHES IN THE EVENT OF MEDICAL EMERGENCIES IN THE ABSENCE OF THE PARENT/GAURDIAN**

**The personal information contained in this form is to be used only for the sole purpose intended and will be disposed of when a Member leaves Baltic Youth FC**

Your consent in Section 3.1 gives authority for a Club Official to sign on your behalf, any documents needed by the Medical Authorities if emergency medical treatment is required for your child.

**7. PLAYER AND GP DETAILS**

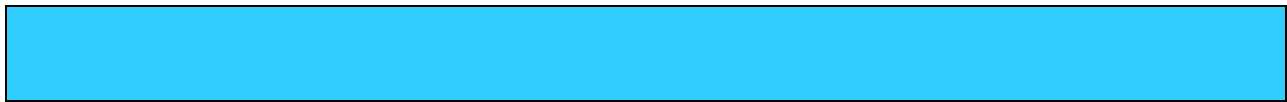
|                           |                   |            |           |
|---------------------------|-------------------|------------|-----------|
| Full Name of Player       |                   |            |           |
| Home Address              |                   |            |           |
|                           |                   |            | Post Code |
| Date of Birth:            | ...../...../..... | NHS Number |           |
| Doctors Name              |                   | Tel No     |           |
| Name & Address of Surgery |                   |            | Post Code |

**8. MEDICAL** (\*Please delete as applicable)

|   |   |
|---|---|
| Date of your child's last Tetanus injection | ...../...../....<br>..... or<br>..... Years ago |
|---|---|



|   |  |
|---|--|
| Has your child any medical illness or allergy?                                |  |
| If YES Please give details  |  |
| Is your child taking regular medication?                                      |  |
| If YES Please give details  |  |
| Are there any other details/medical conditions you feel the Club should know? |  |
| If YES Please give details  |  |



**9. \*PARENT/GUARDIAN CONTACT DETAILS**  
*(\*Please delete as applicable)*

|  |  |               |
|--|--|---------------|
| Home Tel   |  |               |
| Mother's First Name  |  | Mobile Tel No |
| Father's First Name  |  | Mobile Tel No |
| In the event that above named persons cannot be reached, please give two emergency contact names & numbers : |  |               |
| Full Name  |  | Tel No        |
| Full Name  |  | Tel No        |

**PLAYER & PARENT AGREEMENT**

**SPECIFIC RULES OF NOTE ARE:**

- Special emphasis always to be placed on good sportsmanship, good behaviour and clean fair play on and off the field of play by Players, Parents, Team Managers and Club Officials.
- School and school activities must have first priority.
- All Club related external communication, other than internal team administration issues must be submitted to the Club Committee in writing for approval before release.



- For all matches a smart turn out in Club colours is expected.
- In the event of an injury or illness to a player, a Team Manager shall not consider the player for selection to play until he or she has received notification from the player's parents that the player is fully fit.

*Parents, before players apply for membership please read the following Club values, principles and rules:*

- Kit bearing the Club colours and logo will be issued to players for matches. Club kit should only be worn for training and matches and is not for use at other times. If Club membership ceases for any reason it will be your responsibility to ensure that all items of kit, which have been provided and bear the Club logo are returned to the Club otherwise you will be expected to reimburse the Club for the cost of replacement.
- Club Officials are not responsible for players once they leave the training/playing area.

#### **ON TRAINING AND MATCH DAYS Please DO:**

- Remember the players; parents and managers are there to have fun.
- Encourage the players; feel free to appreciate an accurate pass, a well-timed tackle, a breath taking save or a good goal.
- Set an example - applaud good play by both teams.
- Encourage fair play and for players to play to the rules.
- Respect your Manager/Coach at all times.
- Offer your assistance with putting up and taking down of goals, nets, running the line or returning equipment tidily to the storage area after use.
- Inform your Manager/Coach if a player is allowed to travel home alone from the training/match venue.
- Pick up a player promptly from the training/match venue if left alone.
- Take your litter home with you.
- Help to remove all verbal, racial and physical abuse in Football.

#### **Please DO NOT:**

- *Be abusive to anybody.*
- *Criticise another player in public. This applies to both the opposition and your own side. Praise them or keep quiet.*
- *Criticise a match official, they are only human and as such are prone to making mistakes.*
- *Get into any arguments or confrontations with opposition supporters.*
- *Drop a player off at the training/playing area if a club official is not present.*
- *Bring animals near to the playing area.*
- *Make contact with anyone regarding an incident at a match, without first seeking the approval of the Club Committee.*

**ONLY IF BOTH PLAYER AND PARENTS ACCEPT THE 'PLAYER & PARENT AGREEMENT' AND THE FA RESPECT 'CODES OF CONDUCT' SHOULD THE PLAYER APPLY FOR MEMBERSHIP OF BALTIC YOUTH FOOTBALL CLUB.**

**Thank you in anticipation of your support.**

## **"Baltic Youth FC Committee"**

### **COMPLAINT PROCEDURE**

In the event that any member feels that he or she has suffered discrimination in any way, or that the Club Policies, Rules or Code of Conduct has been broken, they should follow the procedure below:

Report the matter to the Club Child Welfare Officer or Club Chairman as detailed below.

As a result of a Complaint being lodged and upheld, the Club's Management Committee will have the power to:



- Warn as to future conduct
- Suspend from membership
- Remove from membership

### **CLUB WELFARE OFFICER**

**Ferdinand Chi Fon** , tel: 07400930363 , E- mail : fon\_ferdinand88@yahoo.com

### **CLUB SECRETARY**

**Ewelina Zalewska** , tel. 07724317674 , E-mail : ewelinazalewska@yahoo.com

### **CHAIRMAN**

**Ferdinand Chi Fon** , tel: 07400930363, E- mail : fon\_ferdinand88@yahoo.com