

## Cratloe GAA Club - Juvenile Membership Form

Please enclose Juvenile Membership which covers cost of insurance.  
€35 per player - €90 max for 3 or more children.

Name of Youth Member: \_\_\_\_\_

Date Of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

School Attended: \_\_\_\_\_

Parents/Guardian's Names: \_\_\_\_\_

Telephone Numbers: \_\_\_\_\_

Contact Address (if different to above) \_\_\_\_\_

Telephone number (if different to above) \_\_\_\_\_

Does Your Child suffer from any illness that the club should be aware of:

\_\_\_\_\_

Does your child have an allergy to any food? \_\_\_\_\_

Do you have any objections to photographs of your child/child's team being put up on the Club website or community newsletter? Yes  No

Do you have any objection to training sessions or matches that your child/child's team is participating in, being video recorded? Yes  No

Do you give consent for the Team Manager to text your child directly with info about training or a match? Yes  No  N/A

In the event of accident/illness requiring hospitalisation, where I cannot be reached, I give permission for the coach/mentor to sign on my behalf, if urgent treatment is required.

Yes  No

I have read & accept the Club's Code of Conduct & Best Practice policy and will adhere to the rules as outlined in the policy. See [www.cratloegaa.com](http://www.cratloegaa.com)

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

Signature of Player \_\_\_\_\_ Date \_\_\_\_\_

Welcome to Cratloe GAA Club — Ar Aghaidh Linn