

**Player Information Sheet**

Please complete in full and return to a member of DSC staff before your child participates in any DSC Elite Football Academy session.

|  |  |  |  |
| --- | --- | --- | --- |
| Player Full Name |  | Date of Birth |  |
| Address |  | Postcode |  |
| First contact name  |  | Mobile telephone number |  |
| Relationship to child: |
| Second contact name |  | Mobile telephone number |  |
| Relationship to child: |
| First contact email address | Please ensure one character per box[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]  |
| Second contact email address | Please ensure one character per box[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]  |
| Medical Information (e.g. asthma, epilepsy, allergies, dyspraxia etc) | Medical conditions, allergies or disabilities: |
| I confirm that the player named above will have a parent or other responsible adult instantly accessible to administer any medication, such as an inhaler, EpiPen or any other medication.Signed: Date:  |

By signing below, you will be agreeing to the following:

* All information provided above is correct at the date of signing.
* If any information changes (medical, contact details etc), you will instantly inform DSC.
* In the event of my child becoming injured or ill whilst participating at DSC Elite Football Academy, I hereby give my consent for my child to receive medical attention.

Parent/Guardian Name (Print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_



Dear Parent/Carer,

**General Data Protection Regulations - Compliance Consent**

We are required to gain your consent to the use of any data relating to your child for the purposes of external marketing and / or the sharing of your child’s details for the purposes of our regular sessions or other activities such as football fixtures.

This form therefore will constitute for verifiable parental consent (gives your consent as parents) for DSC Elite Football Academy Ltd to provide personal identifying information for your child that, may consist of first name, last name, birth date, and, if applicable, email, address, telephone number and medical information in order to attend sessions/fixtures or for DSC Elite Football Academy Ltd to incorporate your child in any internal or external marketing.

**Permission**

From time to time DSC Elite Football Academy Ltd may use player photos for marketing and publicity purposes.  We will only use photos or films of your child for such purposes if you have completed this form.  Once agreed to, the permissions will remain in effect for the duration of the player’s enrolment at DSC Elite Football Academy Ltd unless parental permission is withdrawn in writing.

You may withdraw your consent at any time. If you wish to do so please contact us at the details below.  On receipt of such a notification we will remove any images from our websites/facebook page etc.  Please note that if you have consented to the use of photos in DSC Elite Football Academy Ltd flyers / leaflets etc, we will not be able to remove these images from any documents that have already been printed.

The Company Director, Chris Beckley, is responsible for ensuring that DSC Elite Football Academy Ltd complies with the Data Protection Law.  He can be contacted on info@dscelitefootball.co.uk or 07961755941.

For further information regarding how DSC Elite Football Academy Ltd uses personal data please refer to the privacy notice on our website: http://dscelitefootball.co.uk/privacy-policy/.



**General Data Protection Regulations - Compliance Consent**

Player Name (Print):

**1. Please check the appropriate line below and delete as appropriate:**

\* I give permission

\* I do not give permission

to DSC Elite Football Academy Ltd using photos of my child for the following purposes:

On the DSC Elite Football Academy Ltd website  In DSC marketing materials

On Social Media including Facebook, Instagram and Twitter  Press releases

**2. Please check tick the appropriate box below and delete as appropriate:**

\* I give permission

\* I do not give permission

to DSC Elite Football Academy Ltd sharing my child’s details with DSC staff during their time at DSC for the following purposes:

Sporting events linked to DSC (e.g. fixtures)

**3. Please check tick the appropriate box below and delete as appropriate:**

\* I give permission

\* I do not give permission

to DSC Elite Football Academy Ltd sharing my child’s details including personal characteristics such as special educational needs and medical information as required during their time at DSC.

Parent/Guardian Name (Print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_